

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000012931

Entity Name: 1564 MAIN STREET, LLC

FILED
Oct 11, 2005
Secretary of State

Current Principal Place of Business:

2033 MAIN STREET, SUITE 600
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

2033 MAIN STREET, SUITE 600
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 11-3715142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PFLUGNER, J. GEOFFREY
2033 MAIN STREET, SUITE 600
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: J GEOFFREY PFLUGNER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MASCI, GINO
Address: 86 W 3RD STREET
City-St-Zip: NEW YORK, NY 10012

Title: MGR () Change (X) Addition
Name: MASCI, CATHERINE R
Address: 86 W 3RD STREET
City-St-Zip: NEW YORK, NY 10012

Title: MGR () Change (X) Addition
Name: MASCI, FERNANDO
Address: 86 W 3RD STREET
City-St-Zip: NEW YORK, NY 10012

Title: MGR () Change (X) Addition
Name: MASCI, COLUMBA
Address: 86 W 3RD STREET
City-St-Zip: NEW YORK, NY 10012

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CATHERINE R MASCI

MGR

10/11/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date