

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000026185

Entity Name: PENTAGAMOO, LLC

FILED
Nov 01, 2006
Secretary of State

Current Principal Place of Business:

10715 SANTA LAGUNA DRIVE
BOCA RATON, FL 33428

New Principal Place of Business:

2124 S. UNIVERSITY DRIVE
#54
DAVIE, FL 33324

Current Mailing Address:

10715 SANTA LAGUNA DRIVE
BOCA RATON, FL 33428

New Mailing Address:

2124 S. UNIVERSITY DRIVE
#54
DAVIE, FL 33324

FEI Number: 20-1001393 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:

PSAREAS, NIKOLAOS
10715 SANTA LAGUNA DRIVE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

PSAREAS, NIKOLAOS
21946 PINE TRACE
BOCA RATON, FL 33428 US

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: NIKOLAOS PSAREAS

11/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PSAREAS, NIKOLAOS
Address: 10715 SANTA LAGUNA DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: MGRM () Delete
Name: PSAREAS, JOANNE
Address: 10715 SANTA LAGUNA DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: MGRM () Delete
Name: MACROPOULOS, CATHERINE
Address: 940 SE 5TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PSAREAS, NIKOLAOS
Address: 21946 PINE TRACE
City-St-Zip: BOCA RATON, FL 33428

Title: MGRM (X) Change () Addition
Name: PSAREAS, JOANNE
Address: 21946 PINE TRACE
City-St-Zip: BOCA RATON, FL 33428

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: NIKOLAOS PSAREAS

MR.

11/01/2006

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