## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L04000040500

Entity Name: JCSM, LLC

City-St-Zip:

WESTON, FL 33327

FILED Nov 18, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1565 N. PARK DRIVE 745 SHOTGUN RD SUITE 103 BUILDING E SUNRISE, FL 33326 WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 1565 N. PARK DRIVE 745 SHOTGUN RD SUITE 103 BUILDING E SUNRISE, FL 33326 WESTON, FL 33326 FEI Number: 02-0742204 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: KUTLIN, STANLEY MR 6239 GREENVIEW TERRACE BOCA RATON, FL 33433 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: STANLEY KUTLIN Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MIER. JUAN P MR Name: Name: Address: 1565 N. PARK DRIVE, BUILDING E SUITE 103 Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: MIER, TOMAS MR Name: Address: 470 CONSERVATION DR Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TOMAS MIER MGR 11/18/2009