

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000063644

Entity Name: LCPS INVESTMENTS, LLC

FILED  
Jul 07, 2006  
Secretary of State

**Current Principal Place of Business:**

711 FIFTH AVE.  
NEW YORK, NY 10022

**New Principal Place of Business:**

100 LINCOLN ROAD  
1633  
MIAMI, FL 33139

**Current Mailing Address:**

711 FIFTH AVE.  
NEW YORK, NY 10022

**New Mailing Address:**

100 LINCOLN ROAD  
1633  
MIAMI, FL 33139

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRAYSON, MOISES T ESQ  
BLAXBERG, GRAYSON, KUKOFF & SEGE  
25 SE 2ND AVE, SUITE 730  
MIAMI, FL 33131 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: MOISES T GRAYSON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCATURRO, PHILLIP  
Address: 1455 OCEAN DRIVE APT 1108  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete  
Name: CONTRERAS, LUIS  
Address: 100 LINCOLN ROAD APT. 1633  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SCATURRO, PHILLIP  
Address: 5310 NORTH BAY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

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: PHIL SCATURRO

MGRM

07/07/2006

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