2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jan 23, 2006
Secretary of State

DOCUMENT# L04000077457

Entity Name: PIERRE PROCESSING LIMITED LIABILITY COMPANY

Current Principal Place of Business:

5496 N.W. 44TH WAY
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

5496 N.W. 44TH WAY
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 01-0828890 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORMAN D. KAPLAN, P.A.
7770 W. OAKLAND PARK BLVD., STE. 470
SUNRISE, FL 33351 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: NORMAN D KAPLAN

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: PIERRE, LOUINISE
Address: 5496 N.W. 44TH WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGR ( ) Delete
Name: PIERRE, AXENVIO
Address: 5496 N.W. 44TH WAY
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES:

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

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: LOUINISE JEAN MGR 01/23/2006

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