

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000089338

FILED  
Nov 07, 2008  
Secretary of State

**Entity Name:** S&S PROPERTIES OF SOUTH FLORIDA, LLC

**Current Principal Place of Business:**

4459 DANIELSON DRIVE  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

4095 SR 7 SUITE L, #219  
LAKE WORTH, FL 33467

**New Mailing Address:**

4459 DANIELSON DRIVE  
LAKE WORTH, FL 33467

FEI Number: 65-1238672      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:**

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

BROOKS, SHAN  
4095 SR 7  
SUITE L, #219  
LAKE WORTH, FL 33467 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: SHAN BROOKS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BROOKS, SHAN  
Address: 4095 SR 7 SUITE L, #219  
City-St-Zip: LAKE WORTH, FL 33467

Title: MGR ( ) Delete  
Name: BROOKS, STACY  
Address: 4095 SR 7 SUITE L, #219  
City-St-Zip: LAKE WORTH, FL 33467

**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 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: SHAN BROOKS

MGRM

11/07/2008

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