## 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT					SFCDET FI	LED	
DOCUMENT # L04000090725					DIVISION OF C	Y OF STAIF	
Entity Name     NORGASH LLC					05 nct 2	ORFURATIONS	
					05 OCT -3	AM 10: In	
Principal Place	e of Business	Mailing Address					
21018 NE 32 AVENTURA, F		21018 NE 32ND AVENUE AVENTURA, FL 33180					
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Principal Place of Business     3. Mailing Address			1 A. T				
Suite, Apt.	Browkwaterler.	Suite, Apt. #, etc.	Kucterk				
City & State	<u> </u>	City & State	<u> </u>	09232005 4. FEI Numb		R2E101 (6/04)	For
HOIL	wood FL	HOILWOOD	FL_	20-	3177 194	Not Appl	
Zip _3.30\	Country A	33019	Country S. A	5. Certificate	of Status Desired	\$5.00 Additional Fee Required	·
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name							
TEPPER, BOAZ 21018 NE 32ND AVENUE				Street Address (P.O. Box Number is Not Acceptable)			
	32ND AVENUE A, FL 33180		0.00(7				
			City	of cc	akwater	Zip Code	
The above named entity submits this statement for the nurnose of changing its register.				registered agent or bo		7 <u> 3301</u>	ccent
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						-	
FULS NOWIN SEE 12 450.00 In accordance with s. 607 193(2)(b). F.S., the limited Make check payable to							
FILE NOW!!! FEE IS \$50.00 In accordance with s. 607.193(2)(b), After January 1, 2006, Fee will be \$100.00 liability company did not receive the						- 1	
						irtment of State	
		liability company did n		prior notice.		ertment of State	
After Janua	ary 1, 2006, Fee will be \$100.00	liability company did n	not receive the	MGRM	Florida Depa	GES Change	Addition
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER MGRM TEPPER, BOAZ 21018 NE 32ND AVENUE	liability company did n	10. TITLE NAME STREET ADDRESS	Marm Tepper, R	ADDITIONS/CHAN	GES Change A	Addition
9. TITLE NAME	MANAGING MEMBER MGRM TEPPER, BOAZ	liability company did n	10. TITLE NAME	Marm Tepper, R	Florida Depa	GES Change DA  Vace  19	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBER MGRM TEPPER, BOAZ 21018 NE 32ND AVENUE	ifability company did n	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Marm Tepper, R	ADDITIONS/CHAN	GES Change DA  Vace  19	
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9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER MGRM TEPPER, BOAZ 21018 NE 32ND AVENUE AVENTURA, FL 33180  certify that the information supplied with on this report is true and accurate and ability company or the receiver or trustee.	ifability company did not resemble to experience this filling does not qualify for it that my signature shall have the empowered to except the this resemble.	TO.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTAL	ted in Section 119.07(3 ct as if made under oat by Chapter 608, Florida	ADDITIONS/CHAN  COZZAL WATER TERM  COL FL 330  COL FL	Change   A	Addition  Addition  Addition