

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000094026

Entity Name: BEACH HOUSE, L.L.C.

FILED  
Sep 30, 2005  
Secretary of State

## Current Principal Place of Business:

16850 - 112 COLLINS AVENUE, #158  
SUNNY ISLES BEACH, FL 33160

## New Principal Place of Business:

1850 S OCEAN DR.  
S-1103  
HALLANDALE, FL 33009

## Current Mailing Address:

16850 - 112 COLLINS AVENUE, #158  
SUNNY ISLES BEACH, FL 33160

## New Mailing Address:

1850 S OCEAN DR.  
S-1103  
HALLANDALE, FL 33009

FEI Number: FEI Number Applied For (X) 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:

SEGAL, WILLIAM J ESQ.  
20801 BISCAYNE BLVD., SUITE 304  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

SEGAL, WILLIAM J ESQ.  
20801 BISCAYNE BLVD.  
SUITE 304  
AVENTURA, FL 33180 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: WILLIAM J. SEGAL

09/30/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: M ( ) Change (X) Addition  
Name: JOKALOVA, SILVIA  
Address: 1850 S OCEAN DR. # 1103  
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SILVIA JOKALOVA

M

09/30/2005

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