

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000018363

**FILED**  
**Nov 16, 2006**  
**Secretary of State**

**Entity Name:** SOUZA FAMILY DEVELOPMENT COMPANY, LLC

**Current Principal Place of Business:**

65 TUCKER LANE  
NO. DARTMOUTH, MA 02747

**New Principal Place of Business:**

**Current Mailing Address:**

65 TUCKER LANE  
NO. DARTMOUTH, MA 02747

**New Mailing Address:**

**FEI Number:** 20-2411985

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 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: RICARD ONGE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

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

**ADDITIONS/CHANGES:**

Title: MNGR ( ) Change (X) Addition  
Name: STEPHEN, SOUZA  
Address: 65 TUCKER LANE  
City-St-Zip: NO. DARTMOUTH, MA 02747

Title: MNGR ( ) Change (X) Addition  
Name: PATRICIA, SOUZA  
Address: 65 TUCKER LANE  
City-St-Zip: NO. DARTMOUTH, MA 02747

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: STEPHEN SOUZA

MNGR

11/16/2006

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