

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000019519

Entity Name: STONEBRIDGE CONDO LLC

FILED  
Oct 10, 2006  
Secretary of State

## Current Principal Place of Business:

20475 BISCAYNE BOULEVARD  
#G-9  
AVENTURA, FL 33180 US

## New Principal Place of Business:

## Current Mailing Address:

20475 BISCAYNE BOULEVARD  
#G-9  
AVENTURA, FL 33180 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSA, HARVEY S  
20475 BISCAYNE BOULEVARD  
#G-9  
AVENTURA, FL 33180 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: HARVEY S ROSA

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ROSA, HARVEY S  
Address: 20475 BISCAYNE BOULEVARD #G-9  
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR ( ) Delete  
Name: ROSA, OFRA  
Address: 20475 BISCAYNE BOULEVARD #G-9  
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR ( ) Delete  
Name: ROSA, RICHARD  
Address: 20475 BISCAYNE BOULEVARD #G=9  
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR ( ) Delete  
Name: ROSA, JULIE  
Address: 20475 BISCAYNE BOULEVARD #G-9  
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR ( ) Delete  
Name: ROSA, JOSH  
Address: 20475 BISCAYNE BOULEVARD #G-9  
City-St-Zip: AVENTURA, FL 33180 US

## ADDITIONS/CHANGES:

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

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

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

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: HARVEY S ROSA

MGRM

10/10/2006

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