

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000019855

Entity Name: IVAN PUSHKASH LLC

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

**Current Principal Place of Business:**

1406 CHICOPA ST.  
NORTH PORT, FL 34287

**New Principal Place of Business:**

1581 S. CHAMBERLAIN BLVD  
NORTH PORT, FL 34286

**Current Mailing Address:**

2201 LOGSDON ST.  
NORTH PORT, FL 34287

**New Mailing Address:**

1581 S. CHAMBERLAIN BLVD  
NORTH PORT, FL 34286

FEI Number: 83-0424304      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:**

PUSHKASH, IVAN  
1406 CHICOPA ST.  
NORTH PORT, FL 34287      US

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

PUSHKASH, IVAN  
1581 S. CHAMBERLAIN BLVD  
NORTH PORT, FL 34286      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: IVAN PUSHKASH

10/16/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: BILETSKY, VASYL  
Address: 2174 BRUBECK RD.  
City-St-Zip: NORTH PORT, FL 34287

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: BILETSKY, VASYL  
Address: 1574 KOLTENBORN RD  
City-St-Zip: NORTH PORT, FL 34286

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: VASYL BILETSKY

MGR

10/16/2006

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