

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000031217

Entity Name: PTT OF FLORIDA, LLC

**FILED**  
**Oct 19, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

505 NE 3RD ST #200  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

505 NE 3RD ST #200  
DELRAY BEACH, FL 33483

**New Mailing Address:**

FEI Number: 20-2659883      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:**

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

VALDES-FAULI CORPORATE SERVICES, INC.  
500 E BROWARD BLVD, STE 1400  
FT LAUDERDALE, FL 33394      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: VALDES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: MUNRO, MARIA MGRM  
Address: 505 NE 3RD ST  
City-St-Zip: DELRAY BEACH, FL 33483 US

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: MARIA MUNRO

MGRM

10/19/2006

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