

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000042223

**FILED**  
**Oct 06, 2009**  
**Secretary of State**

**Entity Name:** FOUNTAINVIEW REC LEASE, LLC

**Current Principal Place of Business:**

5975 S.W. 130 TERRACE  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

5975 S.W. 130 TERRACE  
MIAMI, FL 33156

**New Mailing Address:**

**FEI Number:** 57-1220993      **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:**

POLLACK, JAN BELL  
5975 S.W. 130 TERRACE  
MIAMI, FL 33156      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: JAN POLLACK

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: POLLACK, JAN BELL  
Address: 5975 S.W. 130 TERRACE  
City-St-Zip: MIAMI, FL 33156

Title: MGRM      ( ) Delete  
Name: BROTMAN, ILA BELL  
Address: 5975 S.W. 130 TERRACE  
City-St-Zip: MIAMI, FL 33156

Title: MGRM      ( ) Delete  
Name: FEINBERG, SARALYNE TRUSTEE  
Address: 5975 S.W. 130 TERRACE  
City-St-Zip: MIAMI, FL 33156

**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:

I hereby certify that the information supplied with this filing does not qualify 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: JAN POLLACK

PRES

10/06/2009

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