

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000043911

FILED
Oct 06, 2006
Secretary of State

Entity Name: SILKS DECOR AND MORE, LLC

Current Principal Place of Business:

2804 SARENTO PLACE, UNIT 304
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

3954 BYRON DRIVE
RIVIERA BEACH, FL 33404

Current Mailing Address:

2804 SARENTO PLACE, UNIT 304
PALM BEACH GARDENS, FL 33410

New Mailing Address:

3954 BYRON DRIVE
RIVIERA BEACH, FL 33404

FEI Number: 20-2745029 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:

KOZMA, ANDREAS
2804 SARENTO PLACE, UNIT 304
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

KOZMA, ANDREAS
5288 EAGLE LAKE DRIVE
PALM BEACH GARDENS, FL 33418 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: ANDREAS KOZMA

10/06/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KOZMA, ANDREAS
Address: 2804 SARENTO PLACE, UNIT 304
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KOZMA, ANDREAS
Address: 5288 EAGLE LAKE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: ANDREAS KOZMA

MGR

10/06/2006

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