

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000043921

FILED
Sep 18, 2006
Secretary of State

Entity Name: WILLIAMS LIQUIDATIONS, LLC

Current Principal Place of Business:

P.O. BOX 16092
PLANTATION, FL 33318

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 16092
PLANTATION, FL 33318

New Mailing Address:

FEI Number: 05-0622415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 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: FILINGS, INC.

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILLIAMS, DORENE
Address: P.O. BOX 16092
City-St-Zip: PLANTATION, FL 33318

ADDITIONS/CHANGES:

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: DORENE WILLIAMS

MGRM

09/18/2006

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