


# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

<b>DOCUMENT # L05000046672</b>					
<b>1. Entity Name</b> OFFICE BUILDING, LLC					
<b>Principal Place of Business</b> 2821 N.E. 55TH PLACE FT. LAUDERDALE, FL 33308			<b>Mailing Address</b> P.O. BOX 5218 LIGHTHOUSE POINT, FL 33074-5218		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 65-1014477	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$5.00 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  DASH, HARRIET 2821 N.E. 55TH PLACE FT. LAUDERDALE, FL 33308			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City		
FL			Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
<b>SIGNATURE</b> <i>Harriet Dash</i> <b>HARRIET DASH</b> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				<b>DATE</b> <i>7-22-2008</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
<b>FILE NOW!!! FEE IS \$377.50</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	MGRM CLARENCE HOUSE, INC. 2821 N.E. 55TH PLACE FT. LAUDERDALE, FL 33308		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	500133410655 07/24/08--01050--010 **377.50	
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<b>11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.</b>					
<b>SIGNATURE</b> <i>Harriet Dash</i> <b>HARRIET DASH</b> <i>7-22-2008</i> <i>954-946-3462</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

2008 AUG -5 PM 11:45  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



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**REINSTATEMENT**