

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000052450

Entity Name: LOKUS LLC

FILED
Mar 06, 2007
Secretary of State

Current Principal Place of Business:

7955 NW 12 STREET, SUITE 400
MIAMI, FL 33126

New Principal Place of Business:

12356 SW 122 STREET
MIAMI, FL 33186

Current Mailing Address:

7955 NW 12 STREET, SUITE 400
MIAMI, FL 33126

New Mailing Address:

12356 SW 122 STREET
MIAMI, FL 33186

FEI Number: FEI Number Applied For (X) 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:

SHMUEL COHEN, SHAY
12356 SW 122 STREET
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

COHEN, SHAY S
12356 SW 122 STREET
MIAMI, FL 33186 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: SHAY COHEN

03/06/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHMUEL COHEN, SHAY
Address: 12356 SW 122 STREET
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: BENASULY, AVIRAM
Address: 45 PALATINE UNIT 119
City-St-Zip: IRVINE, CA 92612

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COHEN, SHAY
Address: 12356 SW 122 STREET
City-St-Zip: MIAMI, FL 33186

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: SHAY COHEN

P

03/06/2007

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