

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000056422

**FILED**  
**Oct 23, 2006**  
**Secretary of State**

**Entity Name:** CITY CENTER INVESTMENTS BAYLISS INVESTORS, LLC

**Current Principal Place of Business:**

407 LINCOLN ROAD, SUITE 12 J  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

407 LINCOLN ROAD, SUITE 12 J  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

AMERICAN INFORMATION SERVICES, INC.  
ONE S.E. 3RD AVENUE, 28TH FLOOR  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

CITY CENTER INVESTMENTS, INC.  
407 LINCOLN ROAD  
SUITE 12J  
MIAMI BEACH, FL 33139 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: RYAN FREEDMAN

10/23/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: FREEDMAN, RYAN  
Address: 407 LINCOLN ROAD, SUITE 12J  
City-St-Zip: MIAMI BEACH, FL 33139 US

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: RYAN FREEDMAN

MGR

10/23/2006

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