

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 OCT 27 PM 3:33

<b>DOCUMENT # L05000065958</b> 1. Entity Name <b>SRTEO PROPERTIES, LLC</b>					
Principal Place of Business <b>10804 BUTTONWOOD LAKE DR BOCA RATON, FL 33498</b>			Mailing Address <b>10804 BUTTONWOOD LAKE DR BOCA RATON, FL 33498</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country			
4. FEI Number				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>OLIVO, TEOFILO 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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.					
SIGNATURE <i>Teofilo A. Olivo</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<small>(NOTE: Registered Agent signature required when reinstating)</small>		DATE <b>10/21/06</b>	
<b>FILE NOW!!! FEE IS \$50.00</b> <b>After January 1, 2007, Fee will be \$100.00</b>		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		<b>Make check payable to Florida Department of State</b>	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OLIVO, TEOFILO A 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSSI, SANDRA B 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSSI, SANDRA B 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSSI, SANDRA B 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSSI, SANDRA B 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSSI, SANDRA B 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSSI, SANDRA B 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSSI, SANDRA B 10804 BUTTONWOOD LAKE DRIVE BOCA RATON, FL 33498	<input type="checkbox"/> Delete			
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.					
SIGNATURE: <i>Teofilo A. Olivo</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		DATE <b>10/21/06</b>		Daytime Phone # <b>302-3838</b>	

**REINSTATEMENT**

*2006*