

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000079320

Entity Name: ICON BRICKELL 2007 LLC

FILED  
Nov 08, 2007  
Secretary of State

## Current Principal Place of Business:

7563 113TH STREET  
FOREST HILLS, NY 11375

## New Principal Place of Business:

75-63 113 STREET  
FOREST HILLS, NY 11375

## Current Mailing Address:

7563 113TH STREET  
FOREST HILLS, NY 11375

## New Mailing Address:

9559 COLLINS AVE  
806  
SURFSIDE, NY 33154

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:

ZAVULUNOV, EDUARD  
9559 COLLINS AVE., APT 806  
SURFSIDE, FL 33154 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: EDUARD ZAVULUNOV

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MIEROV, MICHAEL  
Address: 7563 113TH STREET  
City-St-Zip: FOREST HILLS, NY 11375

Title: MGRM ( ) Delete  
Name: MIEROV, NISAN  
Address: 7563 113TH STREET  
City-St-Zip: FOREST HILLS, NY 11375

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL MIEROV

P

11/08/2007

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