

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000084597

Entity Name: SAMAKA, LLC.

FILED  
Oct 06, 2009  
Secretary of State

## Current Principal Place of Business:

13176 SW 26TH STREET  
MIRAMAR, FL 33027 US

## New Principal Place of Business:

4338 SW 183RD AVENUE  
MIRAMAR, FL 33029 US

## Current Mailing Address:

13176 SW 26TH STREET  
MIRAMAR, FL 33027 US

## New Mailing Address:

4338 SW 183RD AVENUE  
MIRAMAR, FL 33029 US

FEI Number: 20-3377068      FEI Number Applied For ( )      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:

MIKE'S TAX & ACCOUNTING, INC.  
269 N. UNIVERSITY DRIVE  
SUITE I  
PEMBROKE PINES, FL 33024 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: MICHAEL SARABJIT

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: RAMPERSAD, MUKESH  
Address: 13176 SW 26TH STREET  
City-St-Zip: MIRAMAR, FL 33027 US

Title: MGRM ( ) Delete  
Name: RAMPERSAD, ANIL  
Address: 13176 SW 26TH STREET  
City-St-Zip: MIRAMAR, FL 33027 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: RAMPERSAD, MUKESH  
Address: 4338 SW 183RD AVENUE  
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGRM (X) Change ( ) Addition  
Name: RAMPERSAD, ANIL  
Address: 4338 SW 183RD AVENUE  
City-St-Zip: MIRAMAR, FL 33029 US

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: ANIL RAMPERSAD

MGRM

10/06/2009

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