

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000086277

**FILED**  
**Oct 12, 2009**  
**Secretary of State**

**Entity Name:** LUCKY CHASE PEMBROKE CAY II, LLC

**Current Principal Place of Business:**

C/O DEAKTOR DEVELOPMENT INC.  
1000 JOHNNANNA DR.  
PITTSBURGH, PA 15237 US

**New Principal Place of Business:**

C/O DEAKTOR DEVELOPMENT INC.  
1502 TEAL TRACE  
PITTSBURGH, PA 15237 US

**Current Mailing Address:**

C/O DEAKTOR DEVELOPMENT INC.  
1000 JOHNNANNA DR.  
PITTSBURGH, PA 15237 US

**New Mailing Address:**

C/O DEAKTOR DEVELOPMENT INC.  
1502 TEAL TRACE  
PITTSBURGH, PA 15237 US

**FEI Number:** 20-3412983      **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:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

JACLYN G MUSKAT PA  
2620 WEST COMMUNITY DRIVE  
JUPITER, FL 33458 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: JACLYN G MUSKAT

10/12/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DEAKTOR, SCOTT I  
Address: 1000 JOHNNANNA DR.  
City-St-Zip: PITTSBURGH, PA 15237

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DEAKTOR, SCOTT I  
Address: 1502 TEAL TRACE  
City-St-Zip: PITTSBURGH, PA 15237

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: SCOTT DEAKTOR

MGR

10/12/2009

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