

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000086279

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

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

**Current Principal Place of Business:**

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

**New Mailing Address:**

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

**FEI Number:** 20-3413039      **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:**

BSPA CORPORATE SERVICES, INC.  
350 E. LAS OLAS BLVD STE 1000  
FT. LAUDERDALE, FL 33301 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:** ROBERT BARRON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** DEAKTOR, SCOTT I  
**Address:** 1000 JOHNNANNA DRIVE  
**City-St-Zip:** PITTSBURGH, PA 15237

**ADDITIONS/CHANGES:**

**Title:** MGRM (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