2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 13, 2009
Secretary of State

DOCUMENT# L05000086281

Entity Name: LUCKY CHASE PEMBROKE CAY LP, LLC

Current Principal Place of Business:

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

New Mailing Address:

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

FEI Number: 20-3413310 **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., SUITE 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 JOHNANNA 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 I DEAKTOR MGR 10/13/2009

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