2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Dec 11, 2006
Secretary of State

DOCUMENT# L05000103828

Entity Name: SHULKO REAL ESTATE INVESTMENTS, LLC

Current Principal Place of Business:

C/O MR. JONATHAN LASKO
3890 NORTH 40 AVENUE
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

C/O MR. JONATHAN LASKO
3890 NORTH 40 AVENUE
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-4239777 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

HELLINGER & PENABAD, P.A.
3050 BISCAYNE BLVD. SUITE 700W
MIAMI, FL 33137 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: ANDREW B. HELLINGER

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LASKO, JONATHAN
Address: 3890 NORTH 40 AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM ( ) Delete
Name: SHULMAN, STEVE
Address: 2200 SOUTH OCEAN LANE, POINT OF AMERICAS 2
City-St-Zip: FT. LAUDERDALE, FL

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 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: JONATHAN LASKO MGRM 12/11/2006

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