

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000111503

**FILED**  
**Nov 30, 2006**  
**Secretary of State**

**Entity Name:** BOCA TITLE AND ESCROW ASSOCIATES LLC

**Current Principal Place of Business:**

23024 SANDALFOOT PLAZA DRIVE  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

C/O IL YOUNG CHOI  
1800 N. FEDERAL HIGHWAY SUITE 207  
POMPANO BEACH, FL 33062

**New Mailing Address:**

C/O IL YOUNG CHOI  
200 W CYPRESS CREEK RD. STE.230  
FORT LAUDERDALE, FL 33309

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

CHOI, IL YOUNG  
1800 N. FEDERAL HIGHWAY SUITE 207  
POMPANO BEACH, FL 33062 US

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

CHOI, IL YOUNG  
200 W CYPRESS CREEK RD.  
STE. 230  
FORT LAUDERDALE, FL 33309 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: IL YOUNG CHOI

11/30/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CHOI, ANA  
Address: 23024 SANDAL FOOT PLAZA DRIVE  
City-St-Zip: BOCA RATON, FL 33428

**ADDITIONS/CHANGES:**

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: ANA CHOI

MGRM

11/30/2006

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