

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000002979

FILED
Dec 05, 2007
Secretary of State

Entity Name: BN SEEN LLC

Current Principal Place of Business:

5722 SOUTH FLAMINGO ROAD
#184
COOPER CITY, FL 33330 US

New Principal Place of Business:

6109 ROYAL POINCIANA LANE
TAMARAC, FL 33319 US

Current Mailing Address:

5722 SOUTH FLAMINGO ROAD
#184
COOPER CITY, FL 33330 US

New Mailing Address:

6109 ROYAL POINCIANA LANE
TAMARAC, FL 33319 US

FEI Number: 71-0993792 **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:

SPIEGEL & UTRERA, P.A.
1840 CORAL WAY
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

TAFEEN, STEPHAN Z
6109 ROYAL POINCIANA LANE
TAMARAC, FL 33319 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: STEPHAN Z. TAFEEN

12/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TAFEEN, STEPHAN
Address: #184, 5722 SOUTH FLAMINGO ROAD
City-St-Zip: COOPER CITY, FL 33330

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TAFEEN, STEPHAN
Address: 6109 ROYAL POINCIANA LANE
City-St-Zip: TAMARAC, FL 33319

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: STEPHAN Z. TAFEEN

MGR

12/05/2007

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