

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000003412

**FILED**  
**Sep 17, 2007**  
**Secretary of State**

**Entity Name:** PROPERTY AT 9236 159TH COURT NORTH, JUPITER, LLC

**Current Principal Place of Business:**

9236 159TH COURT NORTH  
JUPITER, FL 33478 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 970723  
COCONUT CREEK, FL 33097 US

**New Mailing Address:**

1643 WARWICK AVENUE  
# 276  
WARWICK, RI 02889 US

**FEI Number:** **FEI Number Applied For (X)** **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:**

BUSH, JOHN  
8181 W BROWARD BLVD  
SUITE 350  
PLANTATION, FL 33324 US

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

HOMEDeAL, INC  
6092 NW 75TH WAY  
PARKLAND, FL 33067 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: ANTONELLA CARLOZZI

09/17/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CARLOZZI, ANTONELLA  
Address: PO BOX 970723  
City-St-Zip: COCONUT CREEK, FL 33097 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CARLOZZI, ANTONELLA  
Address: 1643 WARWICK AVE, 276  
City-St-Zip: WARWICK, RI 02889 US

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: ANTONELLA CARLOZZI

MGR

09/17/2007

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