

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000018776

**FILED**  
**Jan 24, 2008**  
**Secretary of State**

**Entity Name:** HUANG - ZOOK ENTERPRISES, LLC

**Current Principal Place of Business:**

213 OSPREYS LANDING  
1006  
NAPLES, FL 34104 US

**New Principal Place of Business:**

618- MYRTLE RD  
NAPLES, FL 34108 US

**Current Mailing Address:**

213 OSPREYS LANDING  
1006  
NAPLES, FL 34104 US

**New Mailing Address:**

618- MYRTLE RD  
NAPLES, FL 34108 US

**FEI Number:** 20-4342673      **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:**

HUANG, YULAN  
213 OSPREYS LANDING  
1006  
NAPLES, FL 34104 US

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

HUANG, YULAN  
618- MYRTLE RD.  
NAPLES, FL 34108 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: YULAN HUANG

01/24/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ZOOK, MICHAEL E  
Address: 213 OSPREYS LANDING #1006  
City-St-Zip: NAPLES, FL 34104 US

**ADDITIONS/CHANGES:**

Title: R/A (X) Change ( ) Addition  
Name: HUANG, YULAN  
Address: 618- MYRTLE RD.  
City-St-Zip: NAPLES, FL 34108 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: MICHAEL E. ZOOK

MGR

01/24/2008

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