

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000033750

FILED  
Nov 05, 2007  
Secretary of State

Entity Name: EDGE CONSULTING, LLC

**Current Principal Place of Business:**

2600 DOUGLAS ROAD, PH 1  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

550 BILTMORE WAY  
PH3A  
CORAL GABLES, FL 33134

**Current Mailing Address:**

185 SCHENCK AVENUE  
GREAT NECK, NY 11021

**New Mailing Address:**

550 BILTMORE WAY  
PH3A  
CORAL GABLES, FL 33134

FEI Number: 20-4603913      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 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

SETH Z. JOSEPH, P.A.  
255 ALHAMBRA CIRCLE  
SUITE 800  
CORAL GABLES, FL 33134 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: SETH Z. JOSEPH

11/05/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HIRSCHHORN, DOUGLAS K  
Address: 2600 DOUGLAS ROAD, PH 1  
City-St-Zip: CORAL GABLES, FL 33134

Title: S ( ) Delete  
Name: HIRSCHHORN, AMY M  
Address: 2600 DOUGLAS ROAD, PH 1  
City-St-Zip: CORAL GABLES, FL 33134

Title: T ( ) Delete  
Name: HIRSCHHORN, DOUGLAS K  
Address: 2600 DOUGLAS ROAD, PH 1  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: HIRSCHHORN, DOUGLAS K  
Address: 550 BILTMORE WAY, PH3A  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S (X) Change ( ) Addition  
Name: HIRSCHHORN, AMY M  
Address: 550 BILTMORE WAY, PH3A  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: T (X) Change ( ) Addition  
Name: HIRSCHHORN, DOUGLAS K  
Address: 550 BILTMORE WAY, PH3A  
City-St-Zip: CORAL GABLES, FL 33134 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: DOUGLAS HIRSCHHORN

MGR

11/05/2007

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