

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000038027

**FILED**  
**Dec 10, 2009**  
**Secretary of State**

**Entity Name:** PROSPERITY PALMS, LLC

**Current Principal Place of Business:**

137 RADCLIFFE COURT  
JUPITER, FL 33458

**New Principal Place of Business:**

804 PROSPERITY FARMS RD  
SUITE 1  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

137 RADCLIFFE COURT  
JUPITER, FL 33458

**New Mailing Address:**

113 FAIRVIEW EAST  
TEQUESTA, FL 33469

FEI Number: 20-4678947      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:**

JABLONSKI, TODD  
137 RADCLIFFE COURT  
JUPITER, FL 33458      US

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

JABLONSKI, TODD  
113 FAIRVIEW EAST  
TEQUESTA, FL 33469      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: TODD JABLONSKI

12/10/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: JABLONSKI, TODD  
Address: 137 RADCLIFFE COURT  
City-St-Zip: JUPITER, FL 33458

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: JABLONSKI, TODD  
Address: 113 FAIRVIEW EAST  
City-St-Zip: TEQUESTA, FL 33469

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: TODD JABLONSKI

MGR

12/10/2009

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