

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000038527

**Entity Name:** COHEN WATERSIDE, LLC

**FILED**  
**Sep 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

712 U.S. HIGHWAY ONE, STE. 400  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 223244  
WEST PALM BEACH, FL 33422

**New Mailing Address:**

**FEI Number:** 34-2064222

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHEN, FRED C  
712 U.S. HIGHWAY ONE, STE. 400  
NORTH PALM BEACH, FL 33408 US

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

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:** FRED C COHEN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** P  
**Name:** FRED, COHEN  
**Address:** 712 US HIGHWAY 1 STE 400  
**City-St-Zip:** NORTH PALM BEACH, FL 33408

**Title:** ST  
**Name:** COHEN, BRYAN  
**Address:** 712 US HIGHWAY 1 STE 400  
**City-St-Zip:** NORTH PALM BEACH, FL 33408

I hereby 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:** BRYAN S COHEN

ST

09/26/2011

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