

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000053076

FILED
Oct 19, 2009
Secretary of State

Entity Name: PARRY PHILLIPS IMPERIAL, LLC

Current Principal Place of Business:

4475 NORTH STATE ROAD 7
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:

Current Mailing Address:

4475 NORTH STATE ROAD 7
LAUDERDALE LAKES, FL 33319

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

PHILLIPS, BRINEL-JOY
4475 NORTH STATE ROAD 7
LAUDERDALE LAKES, FL 33319 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: BRINEL-JOY PHILLIPS

10/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PHILLIPS, BRINEL-JOY
Address: 4475 NORTH STATE ROAD 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: MGRM () Delete
Name: PHILLIPS, DAVID P
Address: 4475 NORTH STATE ROAD 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRINEL-JOY PHILLIPS

MGRM

10/19/2009

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