

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000069246

Entity Name: BT RET, LLC

**FILED**  
**Dec 06, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

18255 SW 204 STREET  
MIAMI, FL 33187

**New Principal Place of Business:**

**Current Mailing Address:**

18255 SW 204 STREET  
MIAMI, FL 33187

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KIHEI, BENJAMIN D  
18255 SW 204 ST  
MIAMI, FL 33187 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: BENJAMIN D. KIHEI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROSENFELD, TODD  
Address: 7915 SW 64 TERR  
City-St-Zip: MIAMI, FL 33143

Title: MGR ( ) Delete  
Name: KIHEI, BENJAMIN D  
Address: 18255 SW 204 ST  
City-St-Zip: MIAMI, FL 33187

**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: BENJAMIN D. KIHEI

MGR

12/06/2007

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