

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000073802

Entity Name: ARKAL, LLC

FILED  
Oct 14, 2008  
Secretary of State

**Current Principal Place of Business:**

3910 N.E. 168TH STREET  
NORTH MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

3910 N.E. 168TH STREET  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

FEI Number: 20-5261763      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:**

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

SHAMIS, ARKADY  
3910 N.E. 168TH STREET  
NORTH MIAMI BEACH, FL 33160      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: ARKADY SHAMIS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SHAMIS, ARKADY  
Address: 3910 N.E. 168TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGR      ( ) Delete  
Name: BLINKIN, ALEXANDER  
Address: 4000 ISLAND BOULEVARD, APT 1207  
City-St-Zip: AVENTURA, FL 33160

Title: MGR      ( ) Delete  
Name: BLINKIN, LARISA  
Address: 4000 ISLAND BOULEVARD, APT 1207  
City-St-Zip: AVENTURA, FL 33160

**ADDITIONS/CHANGES:**

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

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: ARKADY SHAMIS

MGR

10/14/2008

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