

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L06000076435

1. Entity Name
PBG PROPERTIES, L.L.C.



FILED

09 MAR 17 AM 8:03

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
1430 BARLOW COURT
PALM BEACH GARDENS, FL 33410

Mailing Address
1430 BARLOW COURT
PALM BEACH GARDENS, FL 33410



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02252009 REIN-LLC CR2E101 (1/07)

4. FEI Number
20-5364181

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZINMAN, RORY A
1430 BARLOW COURT
PALM BEACH GARDENS, FL 33410

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature/typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$277.50

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ZINMAN, RORY A
1430 BARLOW COURT
PALM BEACH GARDENS, FL 33410 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400145686834
03/12/09--01046--002 **282.50 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

REINSTATEMENT

08/09

L. SELLERS

MAR 18 2009

EXAMINER