

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000097217

FILED
Oct 11, 2007
Secretary of State

Entity Name: FLORIDIAN DESIGN OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

14436 NW 126TH AVENUE
SUNRISE, FL 33334

New Principal Place of Business:

1436 N.W 126TH AVENUE
SUNRISE, FL 33323

Current Mailing Address:

14436 NW 126TH AVENUE
SUNRISE, FL 33334

New Mailing Address:

1436 N.W 126TH AVENUE
SUNRISE, FL 33323

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOEL, WALDMAN
14436 NW 126TH AVENUE
SUNRISE, FL 33334 US

Name and Address of New Registered Agent:

JOEL, WALDMAN
1436 N.W 126TH AVENUE
SUNRISE, FL 33323 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: JOEL WALDMAN

10/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WALDMAN, JOEL
Address: 14436 NW 126TH AVENUE
City-St-Zip: SUNRISE, FL 33334

Title: MGRM () Delete
Name: LAURA, WALDMAN
Address: 14436 NW 126TH AVENUE
City-St-Zip: SUNRISE, FL 33334

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WALDMAN, JOEL
Address: 1436 N.W 126TH AVENUE
City-St-Zip: SUNRISE, FL 33323

Title: MGRM (X) Change () Addition
Name: LAURA, WALDMAN
Address: 1436 N.W 126TH AVENUE
City-St-Zip: SUNRISE, FL 33323

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: JOEL WALDMAN

MGRM

10/11/2007

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