

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L06000099288					
1. Entity Name BLAU PROPERTY LLC					
Principal Place of Business 2506 N.W. 63RD LANE BOCA RATON, FL 33496-2006			Mailing Address 2506 N.W. 63RD LANE BOCA RATON, FL 33496-2006		
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		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BLAU, RONALD M 2506 N.W. 63RD LANE BOCA RATON, FL 33496-2006			Name <u>CORPORATION SERVICE COMPANY</u> Street Address (P.O. Box Number is Not Acceptable) <u>1201 HAYS STREET</u> City <u>TALLAHASSEE</u> FL Zip Code <u>32301</u>		
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 <u>Deborah D. Skipper</u> Signature, typed or printed name of registered agent and title if applicable			DATE <u>10/24/07</u> (NOTE: Registered Agent's signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$200.00					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	BLAU, RONALD M		NAME		
STREET ADDRESS	2506 N.W. 63RD LANE		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 334962006		CITY-ST-ZIP		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	BLAU, HENRIE W		NAME		
STREET ADDRESS	2506 N.W. 63RD LANE		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 334962006		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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.					
SIGNATURE: <u>MATTHEW A. BERLIN, AUTHORIZED REPRESENTATIVE</u> DATE <u>10/24/07</u> DAYTIME PHONE # <u>607-330-7177</u>					

FILED
07 OCT 24 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400111302804



10242007 REIN-LLC CR2E101 (1/07)

4. FEI Number <u>20-5682456</u>	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required

REINSTATEMENT 2007



CORPORATION SERVICE COMPANY

LOG6000099288

ACCOUNT NO. : 072100000032

REFERENCE : 287118 4322953

AUTHORIZATION

Lyndell Coleman

COST LIMIT : \$ 155.00

FILED
07 OCT 24 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : October 24, 2007

ORDER TIME : 12:27 PM

BK

ORDER NO. : 287118-005

CUSTOMER NO: 4322953

DOMESTIC FILINGS

NAME: BLAU PROPERTY LLC

BK

RECEIVED
07 OCT 24 PM 2:52
CORPORATIONS
DIVISION
TALLAHASSEE, FLORIDA

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper - Ext# 2948

EXAMINER'S INITIALS _____