

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L06000099758

1. Entity Name  
NUA SOLUTIONS LLC



FILED

08 MAY 14 PM 2:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
2030 NW 29 STREET  
OAKLAND PARK, FL 33311

Mailing Address  
2030 NW 29 STREET  
OAKLAND PARK, FL 33331

2. Principal Place of Business - No P.O. Box #  
700 E. DANIA BEACH

Suite, Apt. #, etc.  
STE 202

City & State  
DANIA, FL

Zip  
33004

Country

3. Mailing Address  
700 E. DANIA BEACH BLVD

Suite, Apt. #, etc.  
STE 202

City & State  
DANIA, FL

Zip  
33004

Country

04022008 REIN-LLC CR2E101 (1/07)

4. FEI Number 20-5703607

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

VIVIES, PATRICK  
700 E DANIA BEACH BLVD  
STE 202  
DANIA BEACH, FL 33004

## 7. Name and Address of New Registered Agent

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

TITLE MGR  
NAME DE VERNEJOL, JACQUES ☒ Delete  
STREET ADDRESS 2030 NW 29 STREET  
CITY-ST-ZIP OAKLAND PARK, FL 33311

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME REINSTATEMENT 2007, 2008 ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

## 10. ADDITIONS/CHANGES

TITLE MGR MICHEL ROY 423 RUE ☐ Change ☒ Addition  
NAME EDOUARD CHARLES  
STREET ADDRESS MONTREAL, QC H2V 2N3  
CITY-ST-ZIP

TITLE MGR CHANA BEN DOV 31 12 ☐ Change ☒ Addition  
NAME ST NEW YORK, NY 10003  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE 300128365215 ☐ Change ☐ Addition  
NAME 05/05/08--01019--008 \*\*282.50  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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.

Chana Ben-Dov