

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000110161

Entity Name: JADE OCEAN PH 4601 LLC

FILED  
Oct 19, 2007  
Secretary of State

## Current Principal Place of Business:

16500 COLLINS AVE APT #2051  
SUNNY ISLES BEACH, FL 33160 US

## New Principal Place of Business:

17201 COLLINS AVE APT #3001  
SUNNY ISLES BEACH, FL 33160 US

## Current Mailing Address:

16500 COLLINS AVE APT #2051  
SUNNY ISLES BEACH, FL 33160 US

## New Mailing Address:

17201 COLLINS AVE APT #3001  
SUNNY ISLES BEACH, FL 33160 US

FEI Number: 20-5879903      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:

PAUL FELDMAN, P.A.  
407 LINCOLN ROAD, SUITE 701  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

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: PAUL FELDMAN, P.A.

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: FELDMAN, GREGORY  
Address: 16500 COLLINS AVE APT #2051  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM ( ) Delete  
Name: GAZIN, GENNADY  
Address: 60 LORILLARD RD  
City-St-Zip: TUXEDO PARK, NY 10987 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: FELDMAN, GREGORY  
Address: 17201 COLLINS AVE APT #3001  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: GREGORY FELDMAN

MGRM

10/19/2007

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