

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000014091

Entity Name: TWO FAMILY, LLC

FILED  
Oct 21, 2008  
Secretary of State

**Current Principal Place of Business:**

1532 BACOM POINT ROAD  
PAHOKEE, FL 33476

**New Principal Place of Business:**

667 W. KING ST.  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

1532 BACOM POINT ROAD  
PAHOKEE, FL 33476

**New Mailing Address:**

5110 CYPRESS LINK BLVD.  
ELKTON, FL 32033

FEI Number: 74-3205004      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:**

METTLER, PETER W  
140 ROYAL PALM WAY, SUITE 202  
PALM BEACH, FL 33480      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: PETER METTLER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KAHOK, AHMAD  
Address: 1532 BACOM POINT ROAD  
City-St-Zip: PAHOKEE, FL 33476

Title: MGRM ( ) Delete  
Name: KAHOK, NAIM  
Address: 1532 BACOM POINT ROAD  
City-St-Zip: PAHOKEE, FL 33476

Title: MGR ( ) Delete  
Name: KAHOK, AHMAD  
Address: 1532 BACOM POINT ROAD  
City-St-Zip: PAHOKEE, FL 33476

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KAHOK, AHMAD  
Address: 5110 CYPRESS LINKS BLVD.  
City-St-Zip: ELKTON, FL 32033

Title: MGRM (X) Change ( ) Addition  
Name: KAHOK, NAIM  
Address: 5123 CYPRESS LINKS BLVD.  
City-St-Zip: ELKTON, FL 32033

Title: MGR (X) Change ( ) Addition  
Name: KAHOK, AHMAD  
Address: 5110 CYPRESS LINKS BLVD.  
City-St-Zip: ELKTON, FL 32033

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: AHMAD KAHOK

MGRM

10/21/2008

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