

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000036083

FILED
Oct 12, 2009
Secretary of State

Entity Name: WALLACE AND CAROL SHAPIRO LLC

Current Principal Place of Business:

6773 WOODBRIDGE DRIVE
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

6773 WOODBRIDGE DRIVE
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

Name and Address of New Registered Agent:

WALLACE, SHAPIRO
6773 WOODBRIDGE DRIVE
BOCA RATON, FL 33434 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: WALLACE SHAPIRO

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHAPIRO, WALLACE
Address: 6773 WOODBRIDGE DRIVE
City-St-Zip: BOCA RATON, FL 33434

Title: MGR () Delete
Name: SHAPIRO, CAROL
Address: 6773 WOODBRIDGE DRIVE
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WALLACE SHAPIRO

MR

10/12/2009

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