

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L07000058376

1. Entity Name  
B&B DEERFIELD BEACH PROPERTIES, L.L.C.



FILED

2009 FEB 16 PM 4:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
616 SE 20TH AVENUE, UNIT 301  
DEERFIELD BEACH, FL 33441

Mailing Address  
616 SE 20TH AVENUE, UNIT 301  
DEERFIELD BEACH, FL 33441

2. Principal Place of Business - No P.O. Box #  
701 SOUTH OCEAN WAY

3. Mailing Address  
701 SOUTH OCEAN WAY

Suite, Apt. #, etc.  
UNIT 306

Suite, Apt. #, etc.  
UNIT 306

City & State  
DEERFIELD BEACH, FL

City & State  
DEERFIELD BEACH, FL

Zip  
33441

Country  
BROWARD

Zip  
33441

Country  
BROWARD

01152009 REIN-LLC CR2E101 (1/07)

4. FEI Number  
26-2298939

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

MARMOR, SETH A  
SHAPIRO, BLASI, WASSERMAN & GORA, P.A.  
7777 GLADES ROAD, SUITE 400  
BOCA RATON, FL 33434

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

*Seth A. Marmor* - SETH A. MARMOR, 1-15-2009

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$377.50

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
MGRM  
COX, WILLIAM  
STREET ADDRESS  
616 SE 20TH AVENUE, #301  
CITY-ST-ZIP  
DEERFIELD BEACH, FL 33441

☒ Delete

TITLE  
NAME  
MGRM  
COX, BARBARA  
STREET ADDRESS  
616 SE 20TH AVENUE, #301  
CITY-ST-ZIP  
DEERFIELD BEACH, FL 33441

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE  
NAME  
MEMBER  
STREET ADDRESS  
701 SOUTH OCEAN WAY, UNIT 306  
CITY-ST-ZIP  
DEERFIELD BEACH, FL 33441

☒ Change ☐ Addition

TITLE  
NAME  
MGRM  
STREET ADDRESS  
701 SOUTH OCEAN WAY, UNIT 306  
CITY-ST-ZIP  
DEERFIELD BEACH, FL 33441

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:

*Barbara Cox*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

1-15-2009

Date

Daytime Phone #

BARBARA COX, MANAGING MEMBER