

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000092523

**FILED**  
**Oct 24, 2008**  
**Secretary of State**

**Entity Name:** NEW WORLD TAXI SERVICE LLC

**Current Principal Place of Business:**

620 20TH ST - APT 3  
WPALM BEACH, FL 33407

**New Principal Place of Business:**

2621 SOUTH ST  
WPALM BEACH, FL 33407

**Current Mailing Address:**

P.O. BOX 8611  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:** 41-2260492      **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:**

AGENTS AND CORPORATIONS, INC.  
300 FIFTH AVE SOUTH  
STE 101-330  
NAPLES, FL 34102 US

**Name and Address of New Registered Agent:**

ARTIL, MERILIEN  
2621 SOUTH STREET  
W PALM BEACH, FL 33407 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: MERILIEN ARTIL

10/24/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: ARTIL, MERILIEN  
Address: 620 20TH ST - APT 3  
City-St-Zip: WPALM BEACH, FL 33407

Title: VP (X) Delete  
Name: ELCINE, ROSEMOND  
Address: 620 20TH ST - APT 3  
City-St-Zip: WPALM BEACH, FL 33407

**ADDITIONS/CHANGES:**

Title: P (X) Change ( ) Addition  
Name: ARTIL, MERILIEN  
Address: 2621 SOUTH STREET  
City-St-Zip: WPALM BEACH, FL 33407

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: MERILIEN ARTIL

P

10/24/2008

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