

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000092931

Entity Name: BOYS OF BED LLC

FILED  
May 19, 2009  
Secretary of State

## Current Principal Place of Business:

929 WASHINGTON AVE.  
MIAMI BEACH, FL 33139 US

## New Principal Place of Business:

## Current Mailing Address:

929 WASHINGTON AVE.  
MIAMI BEACH, FL 33139 US

## New Mailing Address:

929 WASHINGTON AVE  
MIAMI BEACH, FL 33139 US

FEI Number: 26-0879242      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:

JARRET W. KAPLAN, PA  
326 71ST STREET  
MIAMI BEACH, FL 33141 US

## Name and Address of New Registered Agent:

DORNE, CRAIG M P.A.  
401 LINCOLN ROAD  
PENTHOUSE SOUTHEAST  
MIAMI BEACH, FL 33139 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: CRAIG M. DORNE

05/19/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LYON, LEE  
Address: 1348 WASHINGTON AVENUE #258  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM ( ) Delete  
Name: TINKLER, LANCE  
Address: 1348 WASHINGTON AVENUE #258  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM (X) Delete  
Name: KAPLAN, ARI  
Address: 2475 NW 38TH STREET  
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: MGRM (X) Delete  
Name: MINOR, MATTHEW  
Address: 2220 NE 203RD AVENUE  
City-St-Zip: NORTH MIAMI BEACH, FL 33180 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: LYON, LEE  
Address: 929 WASHINGTON AVE  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM (X) Change ( ) Addition  
Name: TINKLER, LANCE  
Address: 929 WASHINGTON AVE  
City-St-Zip: MIAMI BEACH, FL 33139 US

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: LEE LYON

MGRM

05/19/2009

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