

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000110077

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: CUT 432, LLC

## Current Principal Place of Business:

432 EAST ATLANTIC AVENUE  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

## Current Mailing Address:

432 EAST ATLANTIC AVENUE  
DELRAY BEACH, FL 33483 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BELLUSCIO, BRANDON  
432 EAST ATLANTIC AVENUE  
DELRAY BEACH, FL 33483 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: BRANDON BELLUSCIO

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BELLUSCIO, BRANDON  
Address: 432 EAST ATLANTIC AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: MGRM ( ) Delete  
Name: ALBE, BRIAN  
Address: 432 EAST ATLANTIC AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGRM ( ) Delete  
Name: POPPER, MICHAEL  
Address: 432 EAST ATLANTIC AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGRM ( ) Delete  
Name: GRENADIER, JOSEPH  
Address: 432 EAST ATLANTIC AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

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

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

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

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

Title: MGRM ( ) Change (X) Addition  
Name: PIZZO, ANTHONY  
Address: 432 EAST ATLANTIC AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

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: JOSEPH S. GRENADIER

MGRM

03/20/2009

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