

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000028582

Entity Name: FKF, LLC

**FILED**  
**Jul 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3959 194TH TRAIL  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

16546 NE 26TH AVE APT 3B  
NORTH MIAMI BEACH, FL 33160

**Current Mailing Address:**

3959 194TH TRAIL  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

16546 NE 26TH AVE APT 3B  
NORTH MIAMI BEACH, FL 33160

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FELDMAN, ISAAC  
3959 194TH TRAIL  
SUNNY ISLES BEACH, FL 33160 US

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

BURRLADER, ALEX C  
16546 NE 26TH AVE APT 3B  
NORTH MIAMI BEACH, FL 33160 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: ALEX BURRLADER

07/12/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FELDMAN, ISAAC  
Address: 16546 NE 26TH AVE APT 3B  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGRM  
Name: ZINI, ELA  
Address: 16546 NE 26TH AVE APT 3B  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGRM  
Name: BURRLADER, CSHIFRA A  
Address: 16546 NE 26TH AVE APT 3B  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

I hereby 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: ALEX BURRLADER

MGRM

07/12/2010

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