

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000039162

Entity Name: S3 REALTY LLC

FILED
Oct 07, 2009
Secretary of State

Current Principal Place of Business:

945 S FEDERAL HWY
DANIA BEACH, FL 33004 US

New Principal Place of Business:

945 S. FEDERAL HWY
DANIA BEACH, FL 33004 US

Current Mailing Address:

945 S FEDERAL HWY
DANIA BEACH, FL 33004 US

New Mailing Address:

945 S. FEDERAL HWY
DANIA BEACH, FL 33004 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

CULMO, THOMAS A
4090 LAGUNA STREET
CORAL GABLES, FL 33146 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: THOMAS A. CULMO

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SMITH, CHARLES S
Address: 3307 NW 29 AVE
City-St-Zip: BOCA RATON, FL 33434 US

Title: DMGR () Delete
Name: JAFFEE, SCOTT
Address: 1900 NW CORP BLVD
City-St-Zip: BOCA RATON, FL 33431 US

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: STRADA, HECTOR
Address: 945 S. FEDERAL HIGHWAY
City-St-Zip: DANIA BEACH, FL 33004 US

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: CHARLES SEYMOUR SMITH

MGR

10/07/2009

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