## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L08000066541

17315 COLLINS AVENUE, #601

City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Address:

Entity Name: SOLE 2203, LLC

FILED Dec 17, 2009 Secretary of State

Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
	LLINS AVENUE				
#601 SUNNY IS	LES BEACH, FL 33160	US			
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
	LLINS AVENUE				
#601 SUNNY IS	LES BEACH, FL 33160	US			
FEI Number		r Applied For (X)	FEI Number Not Applicable (		
	ce with s. 607.193(2)(b), F.S., ti I Address of Current Reg		npany did not receive the prior Name and Addro	notice. ess of New Registered Agent:	
The above in the State	RA, FL 33180 US named entity submits this e of Florida. RE: LUDWIG HOCHSTRA	ASSER		stered office or registered agent, or both	
	Electronic Signature	of Registered Age	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () Delete HOCHSTRASSER, LUDWIG A 17315 COLLINS AVENUE, #60 SUNNY ISLES BEACH, FL 33	D1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete HOCHSTRASSER, LUIS A 17315 COLLINS AVENUE, #60 SUNNY ISLES BEACH, FL 33		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGR () Delete HOCHSTRASSER, FRED A		Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: LUDWIG HOCHSTRASSER MGR 12/17/2009