

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000077437

**FILED**  
**Feb 26, 2011**  
**Secretary of State**

**Entity Name:** SWIM BOCA, LLC

**Current Principal Place of Business:**

701 NW 6TH ST.  
BOCA RATON, FL 33486 US

**New Principal Place of Business:**

6500 NW 2ND AVE  
APT 214  
BOCA RATON, FL 33487 US

**Current Mailing Address:**

701 NW 6TH ST.  
BOCA RATON, FL 33486 US

**New Mailing Address:**

PO BOX 383  
BOCA RATON, FL 33429

**FEI Number:** 27-0746068

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LANGE, ALYSS  
701 NW 6TH ST.  
BOCA RATON, FL 33486 US

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

LANGE, ALYSS  
6500 NW 2ND AVE  
APT 214  
BOCA RATON, FL 33487 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: ALYSS LANGE

02/26/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LANGE, ALYSS  
Address: PO BOX 383  
City-St-Zip: BOCA RATON, FL 33429 US

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: ALYSS LANGE

MGR

02/26/2011

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