

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000125348

**FILED**  
**Dec 05, 2011**  
**Secretary of State**

**Entity Name:** THE NOVELIST, LLC

**Current Principal Place of Business:**

1500 OCEAN DRIVE  
APT. 1203  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1500 OCEAN DRIVE  
APT. 1203  
MIAMI BEACH, FL 33139

**New Mailing Address:**

C/O PHILIP KATZ 4057 ROUTE 9 NORTH  
BOX 386  
HOWELL, NJ 07731

**FEI Number:** 27-4158799

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** CT CORPORATION SYSTEM

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** GOODMAN, JON  
**Address:** 1500 OCEAN DRIVE, APT 1203  
**City-St-Zip:** MIAMI BEACH, FL 33139

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:** JONATHAN GOODMAN

MGRM

12/05/2011

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