

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000060162

Entity Name: AT PIECE LLC

**FILED**  
**Nov 17, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

450 SE 5TH AVENUE  
1201N  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

450 SE 5TH AVENUE  
1201N  
BOCA RATON, FL 33432

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SCHWARTZ, MAXINE  
450 SE 5TH AVENUE  
1201N  
BOCA RATON, FL 33432 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: MAXINE SCHWARTZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SCHWARTZ, MAXINE  
Address: 450 SE 5TH AVENUE, 1201N  
City-St-Zip: BOCA RATON, FL 33432

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: MAXINE SCHWARTZ

MGRM

11/17/2013

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