

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L98000000329

Entity Name: FAUX WORKS, L.C.

**FILED**  
**Oct 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4607 GLENEAGLES DRIVE  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

**Current Mailing Address:**

4607 GLENEAGLES DRIVE  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

FEI Number: 52-2104591

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TURK, LINDA  
4607 GLENEAGLES DRIVE  
BOYNTON BEACH, FL 33436 US

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

CONDE AND COHEN PL  
445 N. ANDREWS AVE  
SPACE 2  
FORT LAUDERDALE, FL 33301 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: ALEXANDER CONDE

10/15/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: TURK, LINDA  
Address: 2607 GLENEAGLES DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33436

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: LINDA TURK

PRES

10/15/2010

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