

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L98000002637

Entity Name: 11150 WEST SAMPLE, L.C.

**FILED**  
**Nov 03, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

2846 CORAL SPRINGS DR.  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

2872 CORAL SPRINGS DR.  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

P.O. BOX 771238  
CORAL SPRINGS, FL 33077

**New Mailing Address:**

FEI Number: 65-0876628      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

OLIVER, MICHAEL  
11010 SW 1ST CT  
POMPANO BEACH, FL 33071      US

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

OLIVER, MICHAEL  
11010 SW 1ST CT  
CORAL SPRINGS, FL 33071      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: MICHAEL OLIVER

11/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: OLIVER, MICHAEL  
Address: 2846 CORAL SPRINGS DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: OLIVER, MICHAEL  
Address: 2872 CORAL SPRINGS DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

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.

SIGNATURE: MICHAEL OLIVER

MGR

11/03/2008

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