2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M01000001707

Entity Name: ANJOY ASSOCIATES, LLC

FILED Feb 08, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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50 RESNIK ROAD PLYMOUTH, MA 02360

Current Mailing Address: New Mailing Address:

50 RESNIK ROAD 2385 EXECUTIVE CENTER DRIVE PLYMOUTH, MA 02360 SUITE 190 BOCA RATON, FL 33431

FEI Number: 04-3395674 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: Name and Address of New Registered Agent:

ELLIS, SETH E 2385 EXECUTIVE CENTER DRIVE SUITE 190 BOCA RATON, FL 33431 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: SETH ELLIS

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Change () Addition () Delete

ANDRADE, ANTONIO Name: Name: Address: 168 GARRISON LANE Address: City-St-Zip: OSTERVILLE, MA 02655 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Name: JOYAL, GARY F Name: Address: 50 RESNIK ROAD Address: City-St-Zip: PLYMOUTH, MA 02360 City-St-Zip:

Title: MGMR () Delete Title: MGMR (X) Change () Addition

JOYAL, GARY F Name: JOYAL PARTNERS, LTD, Name: Address: 50 RESNIK ROAD Address: 50 RESNIK ROAD City-St-Zip: PLYMOUTH, MA 02360 City-St-Zip: PLYMOUTH, MA 02360

Title: MGRM () Delete Title: () Change () Addition

Name: A & M ANDRADE FAMILY, LIMITED PARTN E RSHIP Name: 168 GARRISON LANE Address: Address: City-St-Zip: OSTERVILLE, MA 02360 City-St-Zip:

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: GARY F JOYAL **MGRM** 02/08/2008