

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M03000003819

FILED
Feb 21, 2005
Secretary of State

Entity Name: EMPIRE CAPITAL, LLC

Current Principal Place of Business:

P.O. BOX 625
CHARLESTOWN, NEVIS,

New Principal Place of Business:

800 VILLAGE SQUARE CROSSING
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

P.O. BOX 625
CHARLESTOWN, NEVIS,

New Mailing Address:

800 VILLAGE SQUARE CROSSING
SUITE 317
PALM BEACH GARDENS, FL 33410

FEI Number: 86-1088276 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:

GRIFFITHS, CLIFFORD
2158 BELL CREST CIRCLE
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

GRIFFITHS, CLIFFORD
800 VILLAGE SQUARE CROSSING
SUITE 317
PALM BEACH GARDENS, FL 33410 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: CLIFFORD GRIFFITHS

02/21/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: JONES, LASHALL
Address: P.O. BOX 625
City-St-Zip: CHARLESTOWN, NEVIS,

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CLIFFORD GRIFFTHS

MGR

02/21/2005

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