2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 AUG -2 AM 8:36

DOCUMENT # L01000019667

1. Entity Name
MCEP, L.L.C.

Principal Place of Business	Mailing Address
3215 NE 184 ST., AP 14103 MIAMI, FL 33160	3215 NE 184 ST., AP 14103 MIAMI, FL 33160

07242005 REIN-LLC CR2E101 (6/04)

2. Principal Place of Business	3. Mailing Address
2140 SW 3 Avenue	2140 SW 3 Avenue
Suite, Apt. #, etc. 6c	Suite, Apt. #, etc. 6c
City & State Miami, FL	City & State Miami, FL
Zip / Country 33129 / Miami-Dade	Zip / Country 33129 / Miami-Dade

4. FEI Number
65-1153605 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ORTEGA, LAURENTINO
3215 NE 184 ST., AP 14103
MIAMI, FL 33160

7. Name and Address of New Registered Agent

Name: Juliana Ortega
Street Address (P.O. Box Number is Not Acceptable): 2140 SW 3 Avenue #6c
City: Miami **FL** Zip Code: 33129

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Juliana Ortega 7/27/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $100.00

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM GUILLERMO, MARTHA 3215 NE 184 ST., AP 14103 MIAMI, FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	REINSTATEMENT 8-1-05 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ORTEGA, LAURENTINO 3215 NE 184 ST., AP 14103 MIAMI, FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 600058149126 08/02/05--01036--003 **105.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Juliana Ortega 2140 SW 3 Avenue #6c Miami, FL 33129 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Dolly Gomez 2140 SW 3 Avenue #6c Miami, FL 33129 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Juliana Ortega 7/27/05.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #