

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000028970

FILED
Oct 21, 2005
Secretary of State

Entity Name: VIFOR INTERNATIONAL REPRESENTATIVE OFFICE LATIN AMERICA, LLC

Current Principal Place of Business:

COLONNADE CORPORATE CENTER, SUITE 115
2332 GALIANO STREET SUITE 115
CORAL GABLES, FL 33134 US

New Principal Place of Business:

5301 BLUE LAGOON DRIVE
SUITE 470
MIAMI, FL 33126 US

Current Mailing Address:

COLONNADE CORPORATE CENTER, SUITE 115
2332 GALIANO STREET SUITE 115
CORAL GABLES, FL 33134 US

New Mailing Address:

5301 BLUE LAGOON DRIVE
SUITE 470
MIAMI, FL 33126 US

FEI Number: 20-0144748 **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:

IBARCENA, JOSE
COLONNADE CORPORATE CENTER, SUITE 115
2332 GALIANO STREET SUITE 115
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

IBARCENA, JOSE
5301 BLUE LAGOON DRIVE
SUITE 470
MIAMI, FL 33126 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: JOSE IBARCENA

10/21/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: IBARCENA, JOSE
Address: COLONNADE CORPORATE CENTER, SUITE 115
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: IBARCENA, JOSE
Address: 5301 BLUE LAGOON DRIVE
City-St-Zip: MIAMI, FL 33126 US

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: JOSE IBARCENA

OFFI

10/21/2005

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