

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000022880

**FILED**  
**Jun 09, 2006**  
**Secretary of State**

**Entity Name:** PHASES OF FLIGHT, L.L.C.

**Current Principal Place of Business:**

2000 PONCE DE LEON BLVD., 5TH FLOOR  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

14150 SW 129 STREET  
MIAMI, FL 33186

**Current Mailing Address:**

2000 PONCE DE LEON BLVD., 5TH FLOOR  
CORAL GABLES, FL 33134

**New Mailing Address:**

14150 SW 129 STREET  
MIAMI, FL 33186

**FEI Number:** 20-3134387      **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:**

DEWITT, RICHARD J  
2000 PONCE DE LEON BLVD., 5TH FLOOR  
CORAL GABLES, FL 33134    US

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

CHIN, DENNIS J CPA  
13501 SW 128 STREET  
SUITE 108  
MIAMI, FL 33186 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: DENNIS CHIN CPA

06/09/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: MONSALVE, MONICA  
Address: 2000 PONCE DE LEON BLVD., 5TH FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: MONSALVE, MONICA  
Address: 14150 SW 129 STREET  
City-St-Zip: MIAMI, FL 33186

Title: MGR      ( ) Change (X) Addition  
Name: MONSALVE, CARLOS  
Address: 14150 SW 129 STREET  
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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: CARLOS MONSALVE

MGR

06/09/2006

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