

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Dec 14, 2006
Secretary of State

DOCUMENT# L04000034504

Entity Name: COOME INVESTMENTS, L.L.C.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD., STE. 240
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD., STE. 240
CORAL GABLES, FL 33134

New Mailing Address:

247 SW 8TH STREET #359
MIAMI, FL 33130

FEI Number: 41-2138648 **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:

PRATS, GABRIEL
2121 PONCE DE LEON BLVD., STE. 240
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: IVAN SHERMAN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHERMAN, IVAN
Address: 2121 PONCE DE LEON BLVD., STE. 240
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: ARANA, ALFREDO
Address: 2121 PONCE DE LEON BLVD., STE. 240
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: AVILA, ORLANDO
Address: 2121 PONCE DE LEON BLVD., STE. 240
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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

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

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 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: IVAN SHERMAN

MGR

12/14/2006

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