

# 2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000001014

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** INVERSIONES DORAL, L.L.C.

**Current Principal Place of Business:**

4521 NW 93 AVENUE  
MIAMI, FL 33178 US

**New Principal Place of Business:**

**Current Mailing Address:**

4521 NW 93 AVENUE  
MIAMI, FL 33178 US

**New Mailing Address:**

**FEI Number:** 26-4371399      **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:**

MARRERO, JOSE C  
1820 N. CORPORATE LAKES BLVD.  
SUITE 304  
WESTON, FL 33326 US

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

MARRERO, JOSE C  
1200 BRICKELL AVENUE  
SUITE 505  
MIAMI, FL 33131 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 MARRERO

02/17/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SCHOFFEL, MARTIN  
Address: 4521 NW 93 AVENUE  
City-St-Zip: MIAMI, FL 33178 US

Title: MGRM  
Name: SCHOFFEL, IRMA  
Address: 4521 NW 93 AVENUE  
City-St-Zip: MIAMI, FL 33178 US

I hereby 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: MARTIN SCHOFFEL

MGRM

02/17/2010

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