

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000121378

**FILED**  
**Jul 31, 2007**  
**Secretary of State**

**Entity Name:** NEIGHBORHOOD STRATEGIES LLC

**Current Principal Place of Business:**

1740 SW 64 AVE.  
MIAMI, FL 33155

**New Principal Place of Business:**

701 BRICKELL AVENUE  
SUITE 3000  
MIAMI, FL 33131

**Current Mailing Address:**

1740 SW 64 AVE.  
MIAMI, FL 33155

**New Mailing Address:**

701 BRICKELL AVENUE  
SUITE 3000  
MIAMI, FL 33131

**FEI Number:** 20-4833264      **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:**

FRESEN, ERIK  
1740 SW 64 AVE.  
MIAMI, FL 33155      US

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

FRESEN, ERIK  
701 BRICKELL AVENUE  
SUITE 3000  
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: ERIK FRESEN

07/31/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: FEFE CORP.,  
Address: 1740 SW 64 AVE.  
City-St-Zip: MIAMI, FL 33155

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: FEFE CORP.,  
Address: 701 BRICKELL AVENUE, SUITE 3000  
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify 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: ERIK FRESEN

RA

07/31/2007

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