2010 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Mar 30, 2010
Secretary of State

DOCUMENT# L06000059549

Entity Name: EAL INSURANCE CONSULTANTS, LLC

Current Principal Place of Business:

3625 NW 82ND AVE.
SUITE 307
DORAL, FL 33166

New Principal Place of Business:

Current Mailing Address:

3625 NW 82ND AVE.
SUITE 307
DORAL, FL 33166

New Mailing Address:

FEI Number: 20-5921219 **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:

LAVANDEIRA, EDUARDO A
6417 N.W. 113 PLACE
DORAL, FL 33178 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: EDUARDO A. LAVANDEIRA

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LAVANDEIRA, EDUARDO A
Address: 6417 N.W. 113 PLACE
City-St-Zip: DORAL, FL 33178

Title: MGRM
Name: BOLLOWSKY, PETRA C
Address: 6417 N.W. 113 PLACE
City-St-Zip: DORAL, FL 33178

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 Statues.

SIGNATURE: EDUARDO A. LAVANDEIRA MGR 03/30/2010

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