

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000061202

**FILED**  
**Nov 22, 2009**  
**Secretary of State**

**Entity Name:** SPADON, L.L.C.

**Current Principal Place of Business:**

1820 N. CORPORATE LAKES BLVD.  
SUITE 304  
WESTON, FL 33326

**New Principal Place of Business:**

1200 BRICKELL AVENUE  
SUITE 505  
MIAMI, FL 33131

**Current Mailing Address:**

P.O. BOX 025304  
MIAMI, FL 33102

**New Mailing Address:**

1200 BRICKELL AVENUE  
SUITE 505  
MIAMI, FL 33131

**FEI Number:**                      **FEI Number Applied For (X)**                      **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 ESQ.  
1820 N. CORPORATE LAKES BLVD.  
SUITE 304  
WESTON, FL 33326 US

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

MARRERO, JOSE C ESQ.  
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 C. MARRERO, ESQ.

11/22/2009

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DI MASE COPPOLA, ROBERTO  
Address: 1820 N. CORPORATE LAKES BLVD. SUITE 304  
City-St-Zip: WESTON, FL 33326 FL

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DI MASE COPPOLA, ROBERTO  
Address: 1200 BRICKELL AVENUE #505  
City-St-Zip: MIAMI, FL 33131 FL

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: ROBERTO DI MASE COPPOLA

MGR

11/22/2009

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