

**2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Nov 13, 2009  
Secretary of State**

DOCUMENT# L07000004236

Entity Name: ARAS TRADING & DISTRIBUTORS, LLC

**Current Principal Place of Business:**

7245 NE 4TH AVENUE  
MIAMI, FL 33138 US

**New Principal Place of Business:**

**Current Mailing Address:**

7245 NE 4TH AVENUE  
MIAMI, FL 33138 US

**New Mailing Address:**

FEI Number: 20-8215099      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:**

CASTERA, ARNOLD  
7245 NE 4TH AVENUE  
MIAMI, FL 33138 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: ARNOLD CASTERA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CASTERA, ARNOLD  
Address: 7245 NE 4TH AVE  
City-St-Zip: MIAMI, FL 33138 US

Title: MGR ( ) Delete  
Name: LARAQUE, ASHLEY  
Address: 7245 NE 4TH AVE  
City-St-Zip: MIAMI, FL 33138 US

Title: MGR (X) Delete  
Name: PHILIPPE, ELSA D  
Address: 7245 NE 4TH AVE  
City-St-Zip: MIAMI, FL 33138 US

Title: MGR ( ) Delete  
Name: CASTERA, REGINALD  
Address: 7245 NE 4TH AVE  
City-St-Zip: MIAMI, FL 33138 US

**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:

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

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: ARNOLD CASTERA

MGR

11/13/2009

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