

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000133664

Entity Name: 650 N.W., LLC

**FILED**  
**Oct 04, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

650 NW 120 STREET, SUITE #2  
MIAMI, FL 33168

**New Principal Place of Business:**

**Current Mailing Address:**

650 NW 120 STREET, SUITE #2  
MIAMI, FL 33168

**New Mailing Address:**

19333 COLLINS AVE-1404  
SUNNY ISLES BEACH, FL 33160

FEI Number: 46-2042336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LINDO, MAURICIO  
19333 COLLINS AVENUE, SUITE 1404  
SUNNY ISLES, FL 33160 US

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

LINDO, MAURICIO SR.  
19333 COLLINS AVENUE, SUITE 1404  
SUNNY ISLES, FL 33160 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: MAURICIO LINDO, SR.

10/04/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LINDO, MAURICIO  
Address: 19333 COLLINS AVENUE, SUITE 1404  
City-St-Zip: SUNNY ISLES, FL 33160

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: MAURICIO LINDO, SR.

MGMR

10/04/2013

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