

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L98000001268

**FILED**  
**Nov 23, 2011**  
**Secretary of State**

**Entity Name:** SEVILLA PROFESSIONAL CENTRE, L.C.

**Current Principal Place of Business:**

320 SEVILLA AVENUE  
SUITE 202  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

320 SEVILLA AVENUE  
SUITE 202  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 65-0855483

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BORBOLLA, IGNACIO  
320 SEVILLA AVENUE, #202  
CORAL GABLES, FL 33134 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:** IGNACIO BORBOLLA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** P  
**Name:** BORBOLLA, IGNACIO  
**Address:** 320 SEVILLA AVENUE #202  
**City-St-Zip:** CORAL GABLES, FL 33134 US

**Title:** VP  
**Name:** BORBOLLA, LETICIA H  
**Address:** 320 SEVILLA AVENUE #202  
**City-St-Zip:** CORAL GABLES, FL 33134 US

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:** LETICIA H BORBOLLA

VP

11/23/2011

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