

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L99000005225

Entity Name: ACACIA INVESTORS, L.L.C.

FILED  
Nov 24, 2004  
Secretary of State

**Current Principal Place of Business:**

3550 BISCAYNE BLVD., #310  
MIAMI, FL 33137

**New Principal Place of Business:**

3550 BISCAYNE BLVD.  
STE 310  
MIAMI, FL 33137

**Current Mailing Address:**

3550 BISCAYNE BLVD., #310  
MIAMI, FL 33137

**New Mailing Address:**

3550 BISCAYNE BLVD.  
STE 310  
MIAMI, FL 33137

FEI Number: 65-0950758

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOSEPH, MAENZA  
3550 BISCAYNE BLVD 310  
MIAMI, FL 33137 US

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

JOSEPH, MAENZA  
3550 BISCAYNE BLVD  
STE 310  
MIAMI, FL 33137 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: JOSEPH MAENZA

11/24/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: MAENZA, JOSEPH  
Address: 3550 BISCAYNE BLVD STE 310  
City-St-Zip: MIAMI, FL 33137

Title: MGR ( ) Delete  
Name: WOJNICKI, MICHAEL  
Address: 3550 BICAYNE BLVD 310  
City-St-Zip: MIAMI, FL 33137

**ADDITIONS/CHANGES:**

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 for the exemption stated in Section 119.07(3)(i), 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: JOSEPH MAENZA

MGRM

11/24/2004

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