

# 2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000039513

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** CDO TECHNOLOGICAL PARTNER, INC.

**Current Principal Place of Business:**

6101 BLUE LAGOON DR, SUITE 150  
MIAMI, FL 33126

**New Principal Place of Business:**

8425 NW 8 ST STE 407  
MIAMI, FL 33126

**Current Mailing Address:**

6101 BLUE LAGOON DR, SUITE 150  
MIAMI, FL 33126

**New Mailing Address:**

5805 BLUE LAGOON DR STE 200  
MIAMI, FL 33126

**FEI Number:** 59-3575196

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AG CORPORATE SERVICES, LLC  
5805 BLUE LAGOON DR  
SUITE 200  
MIAMI, FL 33126 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: DOMINGO ALONSO

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MUNOZ, GUSTAVO  
Address: 8425 NW 8 STREET SUITE 407  
City-St-Zip: MIAMI, FL 33126

Title: V  
Name: MUNOZ, MARIA E  
Address: 8425 NW 8 STREET SUITE 407  
City-St-Zip: MIAMI, FL 33126

Title: V  
Name: MUNOZ, JOSE LUIS  
Address: 8425 NW 8 STREET SUITE 407  
City-St-Zip: MIAMI, FL 33126

Title: V  
Name: MUNOZ, EDWIN A  
Address: 8425 NW 8 STREET SUITE 407  
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GUSTAVO MUNOZ

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date