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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 NOV -1 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L01000021932

1. Limited Liability Company's Name
Navidad Real Estate Holding, LLC

2. Principal Office Address		**3.** Mailing Office Address	
1250 E. Hallandale Bch Blvd.		1250 E. Hallandale Bch Blvd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 504		Suite 504	
City & State		City & State	
Hallandale Beach, Florida		Hallandale Beach, FL	
Zip	Country	Zip	Country
33009	U.S.A.	33009	U.S.A.

4. State/Country of Formation
Florida, U.S.A.

5. Date Organized or Qualified To Do Business in Florida 12/18/2001

6. FEI Number 65-1159685 ✔ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☑ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Corporation Company of Miami

Street Address (P.O. Box Number is Not Acceptable): 201 S. Biscayne Blvd - 1500 Miami Center (BB)

Suite, Apt. #, Etc.:

City: Miami | State: FL | Zip Code: 33131

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: CORPORATION COMPANY OF MIAMI — VICE PRESIDENT — RAUL J. SALAS — REGISTERED AGENT MUST SIGN

Date: 10-29-04

CR2E041 (10/02)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	José Antonio Ríos	1418 Commodore Way	Hollywood, FL 33019
MGRM	Mariacristina Rios	1418 Commodore Way	Hollywood, FL 33019
MGR	Ricardo Muñoz-Tebar	1250 E. Hallandale Bch Blvd. Ste 504	Hallandale Beach, FL 33009
MGR	María Isabel Ríos	1250 E. Hallandale Bch Blvd. Ste 504	Hallandale Beach, FL 33009

REINSTATEMENT 2003-2004

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11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: María Isabel Ríos — Date: Oct 27, 2004 — Daytime Phone #: (954) 727 3019

Typed or printed name of signing Managing Member/Manager: María Isabel Ríos