

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000081345

Entity Name: 6M, LLC

**FILED**  
**Jan 03, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

290 NW 165 STREET #M-100  
MIAMI, FL 33169

**New Principal Place of Business:**

5255 COLLINS AVE  
10 F  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

290 NW 165 STREET #M-100  
MIAMI, FL 33169

**New Mailing Address:**

5255 COLLINS AVE  
10 F  
MIAMI BEACH, FL 33140

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MESSERA, JAMES  
290 NW 165 STREET #M-100  
MIAMI, FL 33169 US

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

MESSERA, JAMES  
5255 COLLINS AVE  
10 F  
MIAMI BEACH, FL 33140 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: JAMES MESSERA

01/03/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MESSERA, JAMES  
Address: 5255 COLLINS AVE #10F  
City-St-Zip: MIAMI, FL 33340

**ADDITIONS/CHANGES:**

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 Chapter 119, 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: JAMES MESSERA

MGR.

01/03/2007

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