

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000082943

1. Entity Name
MISTER CONSULTING, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 NOV -6 PM 4:18

Principal Place of Business
10 NW LEJEUNE ROAD
SUITE 400
MIAMI, FL 33126

Mailing Address
10 NW LEJEUNE ROAD
SUITE 400
MIAMI, FL 33126



2. Principal Place of Business - No P.O. Box #
11170 NW 77 Terrace
Suite, Apt. #, etc.

3. Mailing Address
11170 NW 77 Terrace
Suite, Apt. #, etc.

10192007 REIN-LLC CR2E101 (1/07)

City & State
Miami, Florida
Zip
33178
Country
US

City & State
Miami, Florida
Zip
33178
Country
US

4. FEI Number
76-0803527
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ISIS VALLE, P.A.
10 NW LEJEUNE ROAD
SUITE 400
MIAMI, FL 33126

7. Name and Address of New Registered Agent

Name
Martinez, Carlos A.
Street Address (P.O. Box Number is Not Acceptable)
11170 NW 77 Terrace
City
Miami
FL Zip Code
33178

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Carlos A. Martinez

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

10/30/07

DATE

FILE NOW!!! FEE IS \$50.00
After January 1, 2008, Fee will be \$100.00

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to...
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
MGRM
MARTINEZ, CARLOS A
STREET ADDRESS
CITY - ST - ZIP
16790 NW 83 PLACE
MIAMI LAKES, FL 33016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
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CITY - ST - ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
MGRM
Martinez, Carlos A.
STREET ADDRESS
CITY - ST - ZIP
11170 NW 77 Terrace
Miami, Florida 33178 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
000111993790
11/05/07--01027--004 **50.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Carlos A. Martinez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

10/30/07

Daytime Phone #

REINSTATEMENT 2007