

# 2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000059931

**FILED**  
**Oct 07, 2011**  
**Secretary of State**

**Entity Name:** E.S.L. CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

791 CRANDON BOULEVARD APT 1402  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

169 EAST FLAGLER STREET  
STE 800  
MIAMI, FL 33131 US

**New Mailing Address:**

**FEI Number:** 20-1608680      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CANO, LUIS A  
791 CRANDON BOULEVARD APT 1402  
KEY BISCAYNE, FL 33149 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: LUIS. A CANO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CANO, LUIS A  
Address: 791 CRANDON BOULEVARD APT 1402  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM  
Name: TRUJILLO, MARIA P  
Address: 791 CRANDON BOULEVARD APT 1402  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM  
Name: CANO, SAMUEL  
Address: 791 CRANDON BOULEVARD APT 1402  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM  
Name: CANO, EDUARDO  
Address: 791 CRANDON BOULEVARD APT 1402  
City-St-Zip: KEY BISCAYNE, FL 33149

I hereby 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: LUIS A. CANO

MGRM

10/07/2011

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