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: JOSE ALISTE MARTIN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

# 2017 FLORIDA PROFIT CORPORATION REINSTATEMENT

# DOCUMENT# P16000027910

Entity Name: LAST MEANS CONSULTING & INVESTIGATION, INC.

### Current Principal Place of Business:

1 NORTHEAST 2ND AVENUE 2ND FLOOR MIAMI, FL 33132

#### **Current Mailing Address:**

C/O JAY WHITE 1 NORTHEAST 2ND AVENUE 2ND FLOOR MIAMI, FL 33132 US

## FEI Number: APPLIED FOR

## Name and Address of Current Registered Agent:

WHITE, JAY A 1 NORTHEAST 2ND AVENUE 2ND FLOOR MIAMI, FL 33132 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	JAY A WHITE			11/22/2017	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	P	Title	VP		
Name	ALISTE MARTIN, JOSE	Name	ALISTE MARTIN, JOSE		
Address	1 NORTHEAST 2ND AVENUE, 2ND FLOOR	Address	1 NORTHEAST 2ND AVENUE, 2 FLOOR	ND	
City-State-Zip:	MIAMI FL 33132	City-State-Zip:	MIAMI FL 33132		

# Certificate of Status Desired: Yes

11/22/2017

FILED Nov 22, 2017 Secretary of State CR6023177619

Date