

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000100403

**Entity Name:** CMFOUX LLC

**Current Principal Place of Business:**

20335 W COUNTRY CLUB DR  
2406  
AVENTURA, FL 33180

**Current Mailing Address:**

500 BAYVIEW DR  
FW  
SUNNY ISLES, FL 33160 US

**FEI Number:** 80-0867780

**Certificate of Status Desired:** No

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

FOUX, CRISTIANO M  
20335 W COUNTRY CLUB DR  
2406  
AVENTURA, FL 33180 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:** CRISTIANO MANETTI FOUX

10/14/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FOUX, CRISTIANO M  
Address 20335 W COUNTRY CLUB  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name DA SILVA, MAGALI M  
Address 20335 W COUNTRY CLUB DR  
City-State-Zip: AVENTURA FL 33180

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CRISTIANO M FOUX

MGRM

10/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date