

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L15000016612

**Entity Name:** INVERSIONES SISTERS, LLC**Current Principal Place of Business:**2937 S.W. 27 AVENUE  
NO. 104  
COCONUT GROVE, FL 33133**Current Mailing Address:**2937 S.W. 27 AVENUE  
NO. 104  
COCONUT GROVE, FL 33133 US**FEI Number:** 47-3004250**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MORAN DE ZAPATA, LORENA  
2937 S.W. 27 AVENUE  
NO. 104  
COCONUT GROVE, FL 33133 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:** LORENA MORAN DE ZAPATA

03/07/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MORAN DE ROBREDO, GLORIA  
Address 2937 S.W. 27 AVENUE  
NO. 104  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name MORAN DE ELIZONDO, MARIA I  
Address 2937 S.W. 27 AVENUE  
NO. 104  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name MORAN DE ZAPATA, LORENA  
Address 2937 S.W. 27 AVENUE  
NO. 104  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name MORAN DE GONZALEZ, CLAUDIA  
Address 2937 S.W. 27 AVENUE  
NO. 104  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name MORAN PEDERZINI, ROXANA  
Address 2937 S.W. 27 AVENUE  
NO. 104  
City-State-Zip: COCONUT GROVE FL 33133

*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:** LORENA MORAN DE ZAPATA

MGR

03/07/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date