

L000000007528

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

2002 DEC 31 PM 1:30

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**DOCUMENT # L00000007528**

**1. Limited Liability Company's Name**

**KATALYX CONSTRUCTION, LLC**

**2. Principal Office Address**

**1221 BRICKELL AVE**

Suite, Apt. #, etc.

**6TH FLOOR**

City & State

**MIAMI, FL**

Zip

**33131-3258**

Country

**MIAMI-DADE**

**3. Mailing Office Address**

**1221 BRICKELL AVE**

Suite, Apt. #, etc.

**21st Floor c/o Patricia Menendez**

City & State

**MIAMI, FL**

Zip

**33131-3258**

Country

**MIAMI-DADE**

**4. State/Country of Formation**

**FL**

**5. Date Organized or Qualified**

To Do Business in Florida **06/26/2000**

**6. FEI Number**

**52-2260653**

Applied For

Not Applicable

**7. CERTIFICATE OF STATUS DESIRED** ☐

\$5.00 Additional Fee required  
for a Certificate of Status

**8. Name and Address of Current Registered Agent**

Name

**CORPORATION SERVICE COMPANY**

Street Address (P.O. Box Number is Not Acceptable)

**1201 HAYS STREET**

Suite, Apt. #, Etc.

City

**TALLAHASSEE**

State

**FL**

Zip Code

**32301-2525**

**9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.**

Signature of  
Registered Agent

**Brian Courtney**

REGISTERED AGENT **Asst. V. Pres.**

Date

**12/30/02**

**10. Names and Street Addresses of Managing Members/Managers**

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
P/MGR	SANCHEZ TRASOBARES, ELISEO	1221 BRICKELL AVE, 6TH FLOOR	MIAMI, FL 33131
CFO	FEDRIANI, JAVIER	1221 BRICKELL AVE, 6TH FLOOR	MIAMI, FL 33131
T	PRIETO, MARCELO	1221 BRICKELL AVE, 6TH FLOOR	MIAMI, FL 33131
S/MGR	PAREJA, CRISTINA	1221 BRICKELL AVE, 6TH FLOOR	MIAMI, FL 33131

**REINSTATEMENT 2002**

**11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.**

Signature of  
Managing Member/Manager

**Cristina Pareja**

Date **12/20/02**

Daytime Phone #

Typed or printed name of signing Managing Member/Manager

CR2ED41 (8/01)



FILED

2002 DEC 31 PM 1:30

ACCOUNT NO. : 072100000032  
REFERENCE : 875058 4303929

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : December 30, 2002

ORDER TIME : 2:18 PM

ORDER NO. : 875058-005

CUSTOMER NO: 4303929

CUSTOMER: Ms. Alexandra M. Aguirre  
Greenberg Traurig, P.a.  
1221 Brickell Avenue  
21st Floor  
Miami, FL 33131-3238

DOMESTIC FILINGS

NAME: KATALYX CONSTRUCTION, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS \_\_\_\_\_

RECEIVED  
02 DEC 30 PM 4:00  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA