

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 MAY 20 PM 3:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-05/24/02--01012--001  
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DOCUMENT # L00000007541

1. Limited Liability Company's Name

MIAMI LAND Holdings LLC

2. Principal Office Address

3400 SW 27 AV

Suite, Apt. #, etc.

3. Mailing Office Address

3400 SW 27 AV

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI

Zip

33133

Country

MIAMI DADE

Zip

33133

Country

MIAMI DADE

4. State/Country of Formation

FL / MIAMI DADE

5. Date Organized or Qualified  
To Do Business in Florida

6-26-2000

6. FEI Number

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

DOMENICO RABUFFO

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

3400 SW 27 AVE.

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33133

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 Domenico Rabuffo

REGISTERED AGENT MUST SIGN

Date 5-14-02

ALV

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
MGR	Domenico Rabuffo	3400 SW 27 Ave.	MIAMI, FL 33133

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 Domenico Rabuffo

Date 5/14/02

Daytime Phone 305-854-3850

Typed or printed name of signing Managing Member/Manager Domenico Rabuffo

CR2EDM1 (9/00)