

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000007626

Entity Name: ARENA GARAGE, LLC

FILED
Jan 26, 2009
Secretary of State

Current Principal Place of Business:

C/O A.I. BOYMELGREEN
3050 BISCAYNE BLVD., SUITE 700
MIAMI, FL 33137

New Principal Place of Business:

AI FL HOLDINGS
3050 BISCAYNE BLVD., SUITE 700
MIAMI, FL 33137

Current Mailing Address:

C/O A.I. BOYMELGREEN
3050 BISCAYNE BLVD., SUITE 700
MIAMI, FL 33137

New Mailing Address:

AI FL HOLDINGS
3050 BISCAYNE BLVD., SUITE 700
MIAMI, FL 33137

FEI Number: 11-3556033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PENABAD, CORALEE G ESQ
3050 BISCAYNE BLVD.
700W
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

MAYA, TZINDER
3050 BISCAYNE BLVD.
700
MIAMI, FL 33137 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: MAYA TZINDER

01/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OLYMPIA FLORIDA LLC,
Address: 700 PACIFIC STREET
City-St-Zip: BROOKLYN, NY

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OLYMPIA FLORIDA LLC,
Address: 3050 BISCAYNE BLVD. SUITE 700
City-St-Zip: MIAMI, FL

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MAYA TZINDER

MGR

01/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date