

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000007641

FILED
Apr 16, 2009
Secretary of State

Entity Name: PRIELA USA LC

Current Principal Place of Business:

C/O 1200 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131 US

New Principal Place of Business:

C/O 1000 BRICKELL AVENUE
SUITE 300
MIAMI, FL 33131 US

Current Mailing Address:

C/O 1200 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131 US

New Mailing Address:

C/O 1000 BRICKELL AVENUE
SUITE 300
MIAMI, FL 33131 US

FEI Number: 65-1019778 **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:

AGI REGISTERED AGENTS, INC
1200 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

AGI REGISTERED AGENTS, INC
1000 BRICKELL AVENUE
SUITE 300
MIAMI, FL 33131 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: ROBERT R. ADAMS

04/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEQUERICA, RICARDO
Address: 1200 BRICKELL AVENUE, SUITE 900
City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEQUERICA, RICARDO
Address: 1000 BRICKELL AVENUE, SUITE 300
City-St-Zip: MIAMI, FL 33131 US

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: RICARDO LEQUERICA

MGR

04/16/2009

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