JUN.21.2002 1:02PM NO.560 F.1/1

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 JUN 24 PM 1:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000012006

1. Limited Liability Company's Name
Miami Shores Antiques LLC

2. Principal Office Address	3. Mailing Office Address
700 NE 90ST	1300SW 122 Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc. 120
City & State Miami	City & State Miami Florida
Zip 33138 Country USA	Zip 33184 Country USA

4. State/Country of Formation Florida / USA
5. Date Organized or Qualified To Do Business In Florida 10/3/2000
6. FEI Number 65-1046689 ☐ 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: Miami Shores Antiques LLC
Street Address (P.O. Box Number is Not Acceptable): 700 NE 90 ST
Suite, Apt. #, Etc.:
City: Miami State: FL Zip Code: 33138

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: [signature] REGISTERED AGENT MUST SIGN Date: 6/21/02

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	Miami City / State / Zip
President	Roberto Rodriguez	1300SW 122Ave #120	Fla 33184

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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 608.408, 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: [signature] Date: 6/21/02 Daytime Phone: (305) 8547185 (305) 3660528 Bp. (305) 4808997

Typed or printed name of signing Managing Member/Manager: Roberto Rodriguez

(305) 757 4399.