

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000013092

Entity Name: OMNI WEST GROUP, LLC

FILED
Oct 14, 2009
Secretary of State

Current Principal Place of Business:

1680 MICHIGAN AVENUE
SUITE #1015
MIAMI BEACH, FL 33139 US

Current Mailing Address:

1680 MICHIGAN AVENUE
SUITE #1015
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

1040 BISCAYNE BLVD.
SUITE 2904
MIAMI, FL 33132 US

New Mailing Address:

1040 BISCAYNE BLVD.
SUITE 2904
MIAMI, FL 33132 US

FEI Number: 65-1059850 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:

BARRACCA, MASSIMO
2000 NORTH BAYSHORE DRIVE
APT. #802
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

BARRACCA, MASSIMO
1040 BISCAYNE BLVD.
APT. 2904
MIAMI, FL 33132 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: MASSIMO BARRACCA

10/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARRACCA, MASSIMO
Address: 2000 NORTH BAYSHORE DRIVE, APT. #802
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BARRACCA, MASSIMO
Address: 1040 BISCAYNE BLVD. #2904
City-St-Zip: MIAMI, FL 33132

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: MASSIMO BARRACCA

MGR

10/14/2009

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