

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000012070

FILED
Jan 23, 2009
Secretary of State

Entity Name: SEELIGER Y CONDE INTERNATIONAL - MIAMI, L.L.C.

Current Principal Place of Business:

800 DOUGLAS ROAD
SUITE 147
CORAL GABLES, FL 33134

New Principal Place of Business:

1221 BRICKELL AVENUE
9TH FLOOR
MIAMI, FL 33131

Current Mailing Address:

800 DOUGLAS ROAD
SUITE 147
CORAL GABLES, FL 33134

New Mailing Address:

1221 BRICKELL AVENUE
9TH FLOOR
MIAMI, FL 33131

FEI Number: 06-1626125 **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:

SUSAN M. GARCIA, P.A.
901 PONCE DE LEON BLVD.
SUITE 606
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ARAGON REGISTERED AGENTS INC.
255 ALHAMBRA CIRCLE
500
CORAL GABLES, FL 33134 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: MAYRA FERNANDEZ

01/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CASTANON, MARTIN
Address: 800 DOUGLAS ROAD, SUITE 147
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RABASSA, EDUARDO
Address: 1221 BRICKELL AVENUE, 9TH FLOOR
City-St-Zip: MIAMI, FL 33131

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: EDUARDO RABASSA

MGR

01/23/2009

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