

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000014759

FILED  
Nov 17, 2009  
Secretary of State

**Entity Name:** ARTE PRIMERO ENTERPRISE, L.L.C.

**Current Principal Place of Business:**

3500 S MOORING WAY  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

3500 S MOORING WAY  
SUITE 303  
MIAMI, FL 33133

**New Mailing Address:**

**FEI Number:** 22-1478099      **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:**

**Name and Address of New Registered Agent:**

NASREDDINE, MARLENE  
3500 S MOORING WAY  
MIAMI, FL 33133 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: MARLENE NASREDDINE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: NASREDDINE, MARLENE  
Address: 3500 S MOORING WAY  
City-St-Zip: MIAMI, FL 33133

Title: MGR ( ) Delete  
Name: TERASAKI, GEORGE  
Address: 3500 S MOORING WAY  
City-St-Zip: MIAMI, FL 33133

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GEORGE TERASAKI

PRES

11/17/2009

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