

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000015098

FILED  
Aug 10, 2007  
Secretary of State

Entity Name: DESARROLLO EMPRESARIAL LLC

**Current Principal Place of Business:**

1390 BRICKELL AVE  
SUITE 200  
MIAMI, FL 33131 US

**New Principal Place of Business:**

31 SW 5 ST  
SUITE 412  
MIAMI, FL 33131 US

**Current Mailing Address:**

136 MYRTLE ST  
# 2  
BOSTON, MA 02114 US

**New Mailing Address:**

31 SW 5 ST  
SUITE 412  
MIAMI, FL 33131 US

FEI Number: 65-1137500      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:**

ALVARO CASTILLO B., P.A.  
1390 BRICKELL AVE.  
SUITE 200  
MIAMI, FL 33131 US

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

ARTHUR NOGUERA  
407 LINCOLN RD  
SUITE 2F  
MIAMI, FL 33139 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: ARTHUR NOGUERA

08/10/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: VILORIA, MARIA A MGR  
Address: 136 MYRTLE ST APT # 2  
City-St-Zip: BOSTON, MA 02114 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RODRIGUEZ, OCTAVIO MGR  
Address: 31 SW 5 ST  
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: ARTHUR NOGUERA

MBA

08/10/2007

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