

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000016662

FILED
May 06, 2008
Secretary of State

Entity Name: LAGSER U.S. LLC

Current Principal Place of Business:

11418 VISCAYA RD
TAMPA, FL 336372740

New Principal Place of Business:

Current Mailing Address:

4002 W WATERS AVE STE 5
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-3750942 **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:

GODOY, ROSANNA
11418 VISCAYA RD
TAMPA, FL 336372740 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: ROSANNA GODOY

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GODOY, ROSANNA
Address: 4002 W WATERS AVE STE 5
City-St-Zip: TAMPA, FL 33614

Title: MGR () Delete
Name: TIZON, JESUS
Address: PO BOX 272258
City-St-Zip: TAMPA, FL 336882258

Title: MGR () Delete
Name: GODOY, ROMMEL
Address: P.O. BOX 272258
City-St-Zip: TAMPA, FL 336882258

ADDITIONS/CHANGES:

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

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: ROSANA GODOY

MGR

05/06/2008

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