

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000008855

**FILED**  
**Feb 18, 2009**  
**Secretary of State**

**Entity Name:** GNARITAS ASSOCIATED, LLC

**Current Principal Place of Business:**

2305 S.W. 16 TERRACE  
MIAMI, FL 33145

**New Principal Place of Business:**

5 N.W. 107 STREET  
MIAMI SHORES, FL 33168

**Current Mailing Address:**

2305 S.W. 16 TERRACE  
MIAMI, FL 33145

**New Mailing Address:**

5 N.W. 107 STREET  
MIAMI SHORES, FL 33168

**FEI Number:** 03-0463020      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

CASTRO, MARIA-INES  
2333 BRICKELL AVE  
2717  
MIAMI, FL 33129 US

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

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:** MARIA-INES CASTRO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** CASTRO, MARIA-INES  
**Address:** 2305 S.W. 16 TERRACE  
**City-St-Zip:** MIAMI, FL 33145

**ADDITIONS/CHANGES:**

**Title:** MGR      (X) Change ( ) Addition  
**Name:** CASTRO, MARIA-INES  
**Address:** 5 N.W. 107 STREET  
**City-St-Zip:** MIAMI SHORES, FL 33168

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:** MARIA-INES CASTRO

DIR

02/18/2009

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