FEB-04-2004 08:05 PM ARES 305 229 8252 P.002

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APPROVED AND FILED
04 FEB -5 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02000009913

REINSTATEMENT 2003-2004

1. Limited Liability Company's Name
DAKY APARTMENT'S I, L.L.C.

2. Principal Office Address		3. Mailing Office Address	
250 SW 84TH AVE.		250 SW 84TH AVE.	
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A	
City & State MIAMI, FL.		City & State MIAMI, FL.	
Zip 33144	Country U.S.A.	Zip 33144	Country U.S.A.

4. State/Country of Formation: FL. U.S.A.

5. Date Organized or Qualified To Do Business in Florida: 04/25/02

6. FEI Number: 33-1005709 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: RUBEN GARCIA

Street Address (P.O. Box Number is Not Acceptable): 250 SW 84TH AVE.

Suite, Apt. #, Etc.: N/A

City: MIAMI | State: FL | Zip Code: 33144

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: x Ruben Garcia Date: 01/27/04

REGISTERED AGENT MUST SIGN

CR2E041 (10/02)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/ Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	RUBEN GARCIA	250 SW 84TH AVE.	MIAMI, FL. 33144
MGR	MARIA ELENA GARCIA	250 SW 84TH AVE.	MIAMI, FL. 33144
MGR	DAVID GARCIA	250 SW 84TH AVE.	MIAMI, FL. 33144

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: x Ruben Garcia Date: 01/27/04 Daytime Phone #: (305) 228-1719

Typed or printed name of signing Managing Member/Manager: RUBEN GARCIA - MANAGING MEMBER

(H04000023856 3)

Florida Department of State

Division of Corporations
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Fax Number : (850)205-0383

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Account Name : ANA DALMAU ARES, P.A.
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LIMITED LIABILITY REINSTATEMENT

DAKY APARTMENT'S I, L.L.C.

Certificate of Status	0
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