

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

08 DEC 31 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800139399648



12302008 REIN-LLC CR2E101 (1/07)

DOCUMENT # L02000010590					
1. Entity Name CONCORD L.L.C.					
Principal Place of Business 1220 N. MARKET ST. SUITE 808 WILMINGTON, DE 19801			Mailing Address C/O AMERICAN INCORPORATORS LTD. 1220 N. MARKET STREET, SUITE 808 WILMINGTON, DE 19801		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number NOT APPLICABLE				Applied For Not Applicable	
5. Certificate of Status Desired ☐				55.00 Additional Fee Required	
6. Name and Address of Current Registered Agent FLORIDA FILING & SEARCH SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent		
Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <i>[Signature]</i> DATE: <i>12-30-08</i>					
FILE NUMBER FEB IS \$136.75 After January 1, 2009, Fee will be \$277.50		In accordance with s. 807.183(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
8. MANAGING MEMBERS/MANAGERS			9. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EURO AMEX EXCHANGE, INC. STE. 302, EAST BLDG, #34/20, CUBA AV & 34TH PANAMA 5, REP. OF PANAMA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SATURN INVESTMENT GROUP, S.A. STE. 302, EAST BLDG, #34/20, CUBA AV & 34TH PANAMA 5, REP. OF PANAMA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Sid Hanne</i>			12/30/08 302 421-5752		

L020000010590

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12-31-08

NAME: CONCORD LLA

TYPE OF FILING: REINSTATEMENT

COST: \$138.75

RETURN:

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08 DEC 31 PM 1:35
TALLAHASSEE, FLORIDA

Handwritten initials: BK

RECEIVED
08 DEC 31 AM 10:28
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Handwritten signature: [Signature]