

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

07 MAR 23 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000017745

1. Entity Name
DEERWOOD DEVELOPMENT, L.L.C.



Principal Place of Business
2601 SOUTH BAYSHORE DRIVE
SUITE #200
COCONUT GROVE, FL 33133

Mailing Address
2601 S BAYSHORE DRIVE
SUITE #200
COCONUT GROVE, FL 33133

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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

03232007 REIN-LLC

CR2E101 (1/07)

4. FEI Number
16-1616440

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HABER, ROBERT M ESQ
FREEMAN, BUTTERMAN, HABER ET AL
520 BRICKELL KEY DR., SUITE 0-305
MIAMI, FL 33131

Name
Emily M Usow, Esq/Adorno & Yoss, LLP
Street Address (P.O. Box Number is Not Acceptable)
2525 Ponce de Leon Blvd., Ste. 400
City
Miami FL Zip Code
33134

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 *Emily M Usow*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3-23-2007
DATE

FILE NOW!!! FEE IS \$200.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ORTEGA, JORGE
1101 BRICKELL AVE, #400
MIAMI, FL 33131 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
500095692735
04/03/07--01051--007 **155.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ORTEGA, LUIS ALBERTO
1101 BRICKELL AVE, #400
MIAMI, FL 33131 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
500095692735
04/03/07--01051--008 **50.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
EDUARDO, AVILA
2601 S BAYSHORE DRIVE, SUITE 200
COCONUT GROVE, FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
KAPLAN, JACK
2601 S BAYSHORE DRIVE, SUITE 200
COCONUT GROVE, FL 33133 ☐ 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

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: *Jack Kaplan*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3-23-2007 (305) 857-0400
Date Daytime Phone #

REINSTATEMENT

2006-2007