

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000018591

**FILED**  
**Jan 13, 2008**  
**Secretary of State**

**Entity Name:** FERNANDO MIRALLES-WILHELM CONSULTING LLC

**Current Principal Place of Business:**

4553 NW 94 PLACE  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

4553 NW 94 PLACE  
DORAL, FL 33178

**New Mailing Address:**

**FEI Number:** 11-3661432      **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:**

MIRALLES-WILHELM, FERNANDO  
10813 NW 51 LANE  
MIAMI, FL 33178      US

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

MIRALLES-WILHELM, FERNANDO  
4553 NW 94 PLACE  
DORAL, FL 33178      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:** FERNANDO MIRALLES-WILHELM

01/13/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM      ( ) Delete  
**Name:** MIRALLES-WILHELM, FERNANDO  
**Address:** 10813 NW 51 LANE  
**City-St-Zip:** MIAMI, FL 33178

**Title:** MGRM      ( ) Delete  
**Name:** BARBOZA, MONICA  
**Address:** 10813 NW 51 LANE  
**City-St-Zip:** MIAMI, FL 33178

**ADDITIONS/CHANGES:**

**Title:** MGRM      (X) Change ( ) Addition  
**Name:** MIRALLES-WILHELM, FERNANDO  
**Address:** 4553 NW 94 PLACE  
**City-St-Zip:** DORAL, FL 33178

**Title:** MGRM      (X) Change ( ) Addition  
**Name:** BARBOZA, MONICA  
**Address:** 4553 NW 94 PLACE  
**City-St-Zip:** DORAL, FL 33178

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:** FERNANDO MIRALLES-WILHELM

MGRM

01/13/2008

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