

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L02000019961

Entity Name: CELL SERVICE L.L.C.

**FILED**  
**Oct 04, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

8250 NW 25 STREET  
UNIT #3  
MIAMI, FL 33122

## **New Principal Place of Business:**

8109 NW 60 STREET  
MIAMI, FL 33166

## **Current Mailing Address:**

8250 NW 25 STREET  
UNIT #3  
MIAMI, FL 33122

## **New Mailing Address:**

2420 NW 137 TERRACE  
SUNRISE, FL 33323

FEI Number: 55-0789924

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## **Name and Address of Current Registered Agent:**

PRATS, GABRIEL  
2121 PONCE DE LEON BLVD., SUITE 240  
CORAL GABLES, FL 33134 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: GABRIEL PRATS

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: OROZCO, LUIS CARLOS  
Address: 2420 NW 137 TERRACE  
City-St-Zip: SUNRISE, FL 33323

I hereby 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: LUIS C. OROZCO

MGR

10/04/2011

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