

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L02000020811

**FILED**  
**Mar 23, 2007**  
**Secretary of State**

**Entity Name:** TAJ MIRAGE INVESTMENT GROUP, L.L.C.

**Current Principal Place of Business:**

1601 SW 102 AVENUE  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

1601 SW 102 AVENUE  
MIAMI, FL 33165

**New Mailing Address:**

**FEI Number:** 61-1424187      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

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

FEILER, MICHAEL B  
901 PONCE DE LEON BLVD. #PH  
CORAL GABLES, FL 33134 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: MICHAEL FEILER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MARAJAH, RUDOLPH  
Address: 1601 SW 102 AVENUE  
City-St-Zip: MIAMI, FL 33165

Title: MGR ( ) Delete  
Name: MARAJAH, SHANMATIE ASHA  
Address: 1601 SW 102 AVENUE  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHANMATIE A MARAJH

MRS

03/23/2007

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