

2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000028333

FILED
Oct 26, 2010
Secretary of State

Entity Name: ILOVIVA INVESTMENTS, LLC

Current Principal Place of Business:

500 NW 24 ST.
MIAMI, FL 33127

New Principal Place of Business:

220 71ST STREET
SUITE 222
MIAMI BEACH, FL 33141

Current Mailing Address:

500 NW 24 ST.
MIAMI, FL 33127

New Mailing Address:

220 71ST STREET
SUITE 222
MIAMI BEACH, FL 33141

FEI Number: 22-3881659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALLESTAS, VICTOR
500 NW 24 ST.
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

BALLESTAS, VICTOR
220 71ST STREET
MIAMI BEACH, FL 33141 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: VICTOR BALLESTAS

10/26/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BALLESTAS, VICTOR
Address: 220 71ST STREET
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGR
Name: BALLESTAS, IVETTE
Address: 220 71ST STREET
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGR
Name: BALLESTAS, VICTOR MANUEL
Address: 220 71ST STREET
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGR
Name: BALLESTAS, IVONNE M
Address: 220 71ST STREET
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGR
Name: BALLESTAS, LOREN
Address: 220 71ST STREET
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGR
Name: BALLESTAS, VANESSA
Address: 220 71ST STREET
City-St-Zip: MIAMI BEACH, FL 33141

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: VICTOR BALLESTAS

PRES

10/26/2010

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