

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000000795

FILED
Nov 13, 2006
Secretary of State

Entity Name: SMART PROPERTY INVESTMENTS L.L.C.

Current Principal Place of Business:

2742 BISCAYNE BLVD.
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

2742 BISCAYNE BLVD.
MIAMI, FL 33137

New Mailing Address:

FEI Number: 04-3732137 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:

PAZ, ELENA
2742 BISCAYNE BLVD.
MIAMI, FL 33137 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: ELENA PAZ

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PAZ, ARIE
Address: 2742 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: PAZ, ELENA
Address: 2742 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: PAZ, RICARDO
Address: 2742 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES:

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

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: ARIE PAZ

MGRM

11/13/2006

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