

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000003344

Entity Name: EUROMODE USA, LLC

FILED  
Apr 09, 2005  
Secretary of State

**Current Principal Place of Business:**

2400 BRICKELL AVE., SUITE 306D  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

2400 BRICKELL AVE., SUITE 306D  
MIAMI, FL 33129

**New Mailing Address:**

PO BOX 330090  
MIAMI, FL 33233

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

TOVAR, JOSE G  
ARIAS TOVAR & ASSOCIATES, P.A.  
8180 NW 36TH STREET, SUITE 100  
MIAMI, FL 33166 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: JOSE TOVAR

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: GUGLIOTTA, EDMUNDO J  
Address: 2400 BRICKELL AVE., SUITE 306D  
City-St-Zip: MIAMI, FL 33129

Title: MGRM ( ) Delete  
Name: DE GUGLIOTTA, MARZIA DELLE C  
Address: 2400 BRICKELL AVE., SUITE 306D  
City-St-Zip: MIAMI, FL 33129

Title: MGRM ( ) Delete  
Name: GUGLIOTTA, ANGEL A  
Address: 2400 BRICKELL AVE., SUITE 306D  
City-St-Zip: MIAMI, FL 33129

**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 Section 119.07(3)(i), 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: EDMUNDO GUGLIOTTA

MGRM

04/09/2005

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