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From:
Account Name : MELAND RUSSIN & BUDWICK, P.A.
Account Number : 120040000113
Phone : (305)358-6363
Fax Number : (305)358-1221

LIMITED LIABILITY REINSTATEMENT

SACAL FLORIDA INVESTMENTS, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
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LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L0300004358

(Limited Liability Company's Name)

Sacal Florida Investments, LLC

CR2E041 (8/05)

2. Principal Office Address	3. Mailing Office Address
19955 N.E. 39 Court	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Aventura, Florida	City & State
Zip: 33180 Country: USA	Zip Country

4. State/Country of Formation

5. Date Organized or Qualified To Do Business in Florida

6. FEI Number ☑ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Meland Russin & Budwick, P.A.

Street Address (P.O. Box Number is Not Acceptable): 3000 Wachovia Financial Center, 200 S Biscayne Blvd.

Suite, Apt. #, Etc.

City: Miami, Florida State: FL Zip Code: 33131

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: [signature] Date: 11/30/06

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Manag	Elias Sacal	3000 Wachovia Financial Center 200 S. Biscayne Blvd.	Miami, FL 33131
Manag	Mauricio Sacal	3000 Wachovia Financial Center, 200 S. Biscayne Blvd.	Miami, FL 33131
Manag	George Leipuner	" "	" "
Manag	Isaac Leipuner	" "	" "

REINSTATEMENT 2004-06

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when this reinstatement application the reason for dissolution has been eliminated, the limited liability company can satisfies the requirements of section 608.[illegible] F.S., and all fees owed by the limited liability company have been paid. The information contained on this application is true and accurate and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: [signature] Date: [illegible] Daytime Phone # (305) 358-6363

Typed or printed name of signing Managing Member/Manager: Mauricio Sacal

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MELAND RUSSIN & BUDWICK, P.A.

3000 Wachovia Financial Center
200 South Biscayne Boulevard
Miami, Florida 33131
Telephone: (305) 358-6363
Facsimile: (305) 358-1221

www.melandrussin.com

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