

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000006001

Entity Name: MARTINEZ 9580, LLC

FILED
Oct 15, 2004
Secretary of State

Current Principal Place of Business:

4051 ROYAL PALM AVENUE
MIAMI, FL 33140

New Principal Place of Business:

95 NE 80TH TERRACE
MIAMI, FL 33138

Current Mailing Address:

4051 ROYAL PALM AVENUE
MIAMI, FL 33140

New Mailing Address:

95 NE 80 TERRACE
MIAMI, FL 33138

FEI Number: 20-1750220 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:

ROSE, ELLEN ESQ.
C/O THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE, SUITE 2400
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MARTINEZ, EDDIE A
95 NE 80 TERRACE
MIAMI, FL 33138 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: EDDIE A MARTINEZ

10/15/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MARTINEZ, EDDIE A
Address: 95 NE 80 TERRACE
City-St-Zip: MIAMI, FL 33138

Title: MGR () Change (X) Addition
Name: MARTINEZ, MARIA
Address: 95 NE 80 TERRACE
City-St-Zip: MIAMI, FL 33138

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: EDDIE A MARTINEZ

MGR

10/15/2004

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