

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000007643

**FILED**  
**Mar 02, 2006**  
**Secretary of State**

**Entity Name:** TRINIDAD INTERNATIONAL INVESTMENTS, LLC

**Current Principal Place of Business:**

231 LONG IRON LOOP, #15  
CELEBRATION, FL 34747

**New Principal Place of Business:**

215 CELEBRATION PLACE, STE 500 OFFICE 55  
CELEBRATION, FL 34747

**Current Mailing Address:**

231 LONG IRON LOOP, #15  
CELEBRATION, FL 34747

**New Mailing Address:**

1111 ASHBEE LANE  
CELEBRATION, FL 34747

**FEI Number:** 75-3103316

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

TOVAR, ILEANA ARIAS ESQ  
1725 MAIN STREET, SUITE 205  
WESTON, FL 33326 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:** ILEANA ARIAS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DAGER, LUIS J  
Address: 231 LONG IRON LOOP #15  
City-St-Zip: CELEBRATION, FL 34747

Title: MGR ( ) Delete  
Name: CRISTINA CARLESSO DE, DAGER  
Address: 215 CELEBRATION PLACE, STE 500 OFFICE 55  
City-St-Zip: CELEBRATION, FL 34747

Title: MGR (X) Delete  
Name: CADAVIECO, JOSE I  
Address: 215 CELEBRATION PLACE, STE 500 OFFICE 55  
City-St-Zip: CELEBRATION, FL 34747

Title: MGR (X) Delete  
Name: MENA FULCHINI DE CAD, AVIECO  
Address: 215 CELEBRATION PLACE, STE 500 OFFICE 55  
City-St-Zip: CELEBRATION, FL 34747

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DAGER, LUIS J  
Address: 1111 ASHBEE LANE  
City-St-Zip: CELEBRATION, FL 34747

Title: MGR (X) Change ( ) Addition  
Name: CARLESSO, CRISTINA  
Address: 215 CELEBRATION PLACE, STE 500 OFFICE 55  
City-St-Zip: CELEBRATION, FL 34747

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:** LUIS DAGER

MGR

03/02/2006

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