

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000010111

Entity Name: B.I.P. REAL ESTATE LLC

**FILED**  
**Oct 16, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

8995 N.W. 12TH STREET  
MIAMI, FL 33172

**New Principal Place of Business:**

7925 N.W. 12TH STREET  
MIAMI, FL 33126

**Current Mailing Address:**

8995 N.W. 12TH STREET  
MIAMI, FL 33172

**New Mailing Address:**

7925 N.W. 12TH STREET  
MIAMI, FL 33126

FEI Number: 57-1164579

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAFFERTY, WILLIAM L JR, ESQ  
1401 BRICKELL AVENUE STE. 825  
MIAMI, FL 33131 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: WILLIAM L. RAFFERTY, JR., ESQ.

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BALDOVINI, ENRICO  
Address: 8995 N.W. 12TH STREET  
City-St-Zip: MIAMI, FL 33172

Title: MGR (X) Delete  
Name: DIMAIO, CORDIALE  
Address: 8995 NW 12TH STREET  
City-St-Zip: MIAMI, FL 33172

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BRUNO, CLAIRE  
Address: 7925 N.W. 12TH STREET  
City-St-Zip: MIAMI, FL 33126

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: CLAIRE BRUNO

MGR

10/16/2006

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