

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000010267

Entity Name: ACACIAS, LLC

FILED
Feb 27, 2006
Secretary of State

Current Principal Place of Business:

C/O 2838 N.E. 187TH STREET
AVENTURA, FL 33180

New Principal Place of Business:

1250 E HALLANDALE BEACH BLVD
SUITE PH3
HALLANDALE, FL 33009

Current Mailing Address:

C/O 2838 N.E. 187TH STREET
501
AVENTURA, FL 33180

New Mailing Address:

1651 DIPLOMAT DRIVE
NORTH MIAMI BEACH, FL 33179

FEI Number: FEI Number Applied For (X) 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:

SNYDER, JENNIFER S ESQUIRE
20801 BISCAYNE BOULEVARD
501
AVENTURA, FL 33180 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: SNYDER JENNIFFER S.

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHNEIDERMAN, URI
Address: C/O 2838 N.E. 187TH STREET
City-St-Zip: AVENTURA, FL 33180

Title: MGR () Delete
Name: POPLICHER, MAURICIO
Address: C/O 2838 N.E. 187TH STREET
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

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: MAURICIO POPLICHER

MGR

02/27/2006

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