Entity Name NINA'S HIALEA rincipel Place of Busir 355 WEST 44 PLACI IALEAH, FL 33012 DO N 6. Na SMITH, GARY V 230 NW 7 STRE AIAMI, FL 33125 . The above named e the obligations of rp IGNATURE Spreuce, n Filling Fe Due by F	E, STE. 100 NOT WRITE ame and Address of Current f EET Stillered signific his statement for gistigred signific hyped or panted neme of regulared spans byped or panted neme of regulared spans MANAGING MEMBE	C Mailing Address 1355 WEST 44 PLACE, STE HIALEAH, FL 33012 IN THIS SP/ Registered Agent Registered Agent (NOTE Registered Agent)		04-24-2007 90108 026 ****50.00 30011225
355 WEST 44 PLACI IALEAH, FL 33012 DO N 6. Na 5. Ma 5. MITH, GARY V 230 NW 7 STRE AIAMI, FL 33125 The above named e the obligations of re 1GNATURE Signetice, F 111ng Fe Due by F TLE AME TLE AME TREET ADDRESS ITY-ST-ZIP	E, STE. 100 NOT WRITE ame and Address of Current f EET Stillered signific his statement for gistigred signific hyped or panted neme of regulared spans byped or panted neme of regulared spans MANAGING MEMBE	1355 WEST 44 PLACE, STE HIALEAH, FL 33012 IN THIS SP/ Registered Agent Registered Agent (MOTE: Registered Agent)	ACE	01032007 No Chg-LLC CR2E083 (11/05) 4. FEi Number 75-3116431 Applied For Not Applicable 5. Certificate of Status Desired \$5.00 Additional Fee Required DO NOT WRITE IN THIS SPACE wred agent, or both, in the State of Florida. 1 am familiar with, and accept 4/13/2
6. Na SMITH, GARY V 230 NW 7 STRE AIAMI, FL 33125 The above named e the obligations of p IGNATURE Service, n Filing Fe Due by I TLE AME IREET ADDRESS ITY-ST-ZIP	entity submits this statement for agristered agent. Sysed a parted neme of registered egent agent 1, 2007 MANAGING MEMBE	Registered Agent If the purpose of changing its registered to the second	stered office or registe	01032007 No Chg-LLC CR2E083 (11/05) 4. FEi Number Applied For 75-3116431 Not Applicatile 5. Certificate of Status Desired \$5.00 Additional Fee Required DO NOT WRITE IN THIS SPACE wed agent, or both, in the State of Florida. 1 am familiar with, and accept 4/13/3
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ITEET ADDRESS ITY-ST-ZP 1. I hereby certify that indicated on this r limited liability con		h this filing does not qualify for th d that my signature shall have the e empowered to execute this rep	e exemptions containe same legal effect as ort as required by Ch.	ed in Chapter 119, Florida Statutes. I further certify that the information if made under oath; that I am a managing member or manager of the apter 608, Florida Statutes. $M \frac{4/2}{07} \frac{305-8}{305-163} \times 1000$