

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000011499

Entity Name: WISCO VENTURES, LLC

FILED  
Oct 19, 2007  
Secretary of State

**Current Principal Place of Business:**

11234 S.W. 64 LANE  
MIAMI, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

11234 S.W. 64 LANE  
MIAMI, FL 33134 US

**New Mailing Address:**

FEI Number: 56-2336988      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:**

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

CASTELLANOS, REINALDO ESQ.  
11234 S.W. 64 LANE  
MIAMI, FL 33134 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: REINALDO CASTELLANOS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WISCO ENTERPRISES LL, P  
Address: N9652 HIGHLINE ROAD  
City-St-Zip: KAUKAUNA, WI 54130 US

Title: MGRM ( ) Delete  
Name: JANE, JULIO L  
Address: 9725 NW 52 STREET, APT. 310  
City-St-Zip: MIAMI, FL 33178 US

Title: MGRM ( ) Delete  
Name: INVERSIONES MCQ, S.A. .  
Address: LA URUCA DE CAPRIS, 75 METROS NORTE  
City-St-Zip: EDIFICIO REQUISIA SAN JOSE, US

Title: MGR ( ) Delete  
Name: JOHNSON, KIM  
Address: N9652 HIGHLINE ROAD  
City-St-Zip: KAUKAUNA, WI 54130 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: MARIO A. DAVILA

MGRM

10/19/2007

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