

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000013312

**FILED**  
**Oct 29, 2008**  
**Secretary of State**

**Entity Name:** ELITE PROPERTY HOLDINGS LLC

**Current Principal Place of Business:**

10008 WEST FLAGLER STREET  
SUITE 287  
MIAMI, FL 33174

**New Principal Place of Business:**

**Current Mailing Address:**

10008 WEST FLAGLER STREET  
SUITE 287  
MIAMI, FL 33174

**New Mailing Address:**

**FEI Number:** 32-0071056      **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:**

GURIAN, JORGE  
2600 DOUGLAS RD.  
SUITE 1100  
CORAL GABLES, FL 33134 US

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

GURIAN, JORGE L.  
2600 DOUGLAS RD.  
SUITE 1100  
CORAL GABLES, 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: JORGE L. GURIAN

10/29/2008

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THE CORUJO FAMILY LI, MITED PARTNERS H IP  
Address: 10008 WEST FLAGLER STREET SUITE 287  
City-St-Zip: MIAMI, FL 33174

**ADDITIONS/CHANGES:**

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: THE CORUJO FAMILY LIMITED PARTNERSHIP

MGRM

10/29/2008

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