

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000013577

FILED
Oct 04, 2008
Secretary of State

Entity Name: XIHEI, L.L.C.

Current Principal Place of Business:

18851 NE 29TH AV, SUITE 900
AVENTURA, FL 33180

New Principal Place of Business:

290, 174TH ST
APT. # 1705
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

18851 NE 29TH AV, SUITE 900
AVENTURA, FL 33180

New Mailing Address:

290, 174TH ST
APT. # 1705
SUNNY ISLES BEACH, FL 33160

FEI Number: 20-0192861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEITMAN ARDON, XINIA M ESQ
18851 NE 29TH AV, SUITE 900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

HEITMAN ARDON, XINIA M ESQ
290, 174TH ST.
APT. # 1705
SUNNY ISLES BEACH, FL 33160 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: FERNANDO ALTMANN O.

10/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: ALTMANN, FERNANDO
Address: 18851 NE 29 TH AVENUE, SUITE 900
City-St-Zip: AVENTURA, FL 33180

Title: V-P () Delete
Name: HEITMAN, ARDON M XINIA
Address: 290 174TH APT 1705
City-St-Zip: NORT MIAMI BEACH, FL 33180

Title: TRE () Delete
Name: ATLMAN, NICOLE
Address: 5701 CAMINO DEL SOL
City-St-Zip: BOCA DE RATON, FL 33433

Title: CEO () Delete
Name: ATLMAN, SILVIA
Address: 290 174 TH APT 1705
City-St-Zip: NORT MIAMI BEACH, FL 33180

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: ALTMANN, FERNANDO
Address: 290, 174TH ST. APT. # 1705
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: V-P (X) Change () Addition
Name: HEITMANN, ARDON M XINIA
Address: 290 174TH APT 1705
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: TRE (X) Change () Addition
Name: ATLMANN, NICOLE
Address: 290, 174TH ST, APT 1705
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: CEO (X) Change () Addition
Name: ALTMANN, SILVIA
Address: 290 174 TH APT 1705
City-St-Zip: NORT MIAMI BEACH, FL 33160

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: FERNANDO ALTMANN

PRES

10/04/2008

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