

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000016280

Entity Name: BCCV UNIVERSAL HOLDING, LLC

FILED
Oct 24, 2007
Secretary of State

Current Principal Place of Business:

2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134

New Principal Place of Business:

5805 BLUE LAGOON DR
STE 200
MIAMI, FL 33126

Current Mailing Address:

2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134

New Mailing Address:

5805 BLUE LAGOON DR
STE 200
MIAMI, FL 33126

FEI Number: 54-2110972 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:

CONSULTING SERVICES OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

AG CORPORATE SERVICES, LLC
5805 BLUE LAGOON DR
STE 200
MIAMI, FL 33126 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: DOMINGO ALONSO

10/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PASOS, ORFA NELLY
Address: 2121 PONCE DE LEON BLVD. #1050
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: MEDINA, CARLOS
Address: 2121 PONCE DE LEON BLVD. #1050
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: INVERSIONES FELPA LL, C
Address: 9974 NOBHILL LANE
City-St-Zip: SUNRISE, FL 33351

Title: MGRM (X) Change () Addition
Name: VIAJES GEMINIS, LLC,
Address: 9974 NOBHILL LANE
City-St-Zip: SUNRISE, FL 33351

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: ORFA NELLY PASOS MONCADA

MGR

10/24/2007

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