

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000020535

FILED
Oct 10, 2005
Secretary of State

Entity Name: INTERNATIONAL BUSINESS CONSULTANT LLC

Current Principal Place of Business:

PO BOX 720394
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

PO BOX 720394
MIAMI, FL 33172

New Mailing Address:

FEI Number: 14-1886327 **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:

POMBO, ERNESTO J
515 SW 102 AVE
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

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: ERNESTO J POMBO

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POMBO, ERNESTO J
Address: PO BOX 720394
City-St-Zip: MIAMI, FL 33172

Title: MGRM () Delete
Name: POMBO, MARIA A
Address: PO BOX 720394
City-St-Zip: MIAMI, FL 33172

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: POMBO, JAIME
Address: PO BOX 720394
City-St-Zip: MIAMI, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ERNESTO J POMBO

MGRM

10/10/2005

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