## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L03000028556

Entity Name: FTA-BUSINESS MULTIPLIER, LLC

FILED Oct 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

901 BRICKELL KEY BOULEVARD 900 BRICKELL KEY BOULEVARD

STE 2707 STE 1503

MIAMI, FL 33131 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

901 BRICKELL KEY BOULEVARD 900 BRICKELL KEY BOULEVARD

STE 2707 STE 1503

MIAMI, FL 33131 MIAMI, FL 33131

FEI Number: 83-0367399 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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:

RICCHERI, LUIS GADDA, BEATRIZ

901 BRICKELL KEY BOULEVARD 900 BRICKELL KEY BOULEVARD

STE. 2707 STE. 1503

MIAMI, FL 33131 US MIAMI, FL 33131 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: BEATRIZ GADDA 10/01/2009

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

Name: HUNT, STACIE Name: Address: 901 BRICKELL KEY BLVD. STE 2707 Address:

Address: 901 BRICKELL REY BLVD. STE 2/07 Address:
City-St-Zip: MIAMI, FL 33131 City-St-Zip:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

Name: GADDA-RICCHERI, BEATRIZ M.A. Name: GADDA, BEATRIZ M.A

Address: 901 BRICKELL KEY BLVD. STE 2707 Address: 900 BRICKELL KEY BLVD. STE 1503

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 RICCHERI, LUIS
 Name:

 Address:
 901 BRICKELL KEY BLVD. STE 2707
 Address:

 City-St-Zip:
 MIAMI, FL 33131
 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: BEATRIZ GADDA MGR 10/01/2009