

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000034563

**FILED**  
**Oct 27, 2007**  
**Secretary of State**

**Entity Name:** GOLD ENTERPRISES LLC

**Current Principal Place of Business:**

375 SOUTH ROYAL POINCIANA BLVD SUITE 3A  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

375 SOUTH ROYAL POINCIANA BLVD SUITE 3A  
3A  
MIAMI, FL 33166

**New Mailing Address:**

**FEI Number:** 54-2126775      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

LOPEZ, MARILUZ  
375 SOUTH ROYAL POINCIANA BLVD SUITE 3A  
3A  
MIAMI, FL 33166 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:** MARILUZ LOPEZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** LOPEZ, MARILUZ  
**Address:** 375 SOUTH ROYAL POINCIANA BLVD SUITE 3A  
**City-St-Zip:** MIAMI, FL 33166

**Title:** MGR (X) Delete  
**Name:** ROJAS, ALIDA  
**Address:** 375 SOUTH ROYAL POINCIANA BLVD STE 3-A  
**City-St-Zip:** MIAMI, FL 33166

**ADDITIONS/CHANGES:**

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

**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:** MARILUZ LOPEZ

MGR

10/27/2007

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