

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000036684

Entity Name: MCVC HOLDINGS, LLC

FILED
Apr 04, 2007
Secretary of State

Current Principal Place of Business:

5701 COLLINS AVE., APT. 708
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

5701 COLLINS AVE., APT. 708
MIAMI BEACH, FL 33140

New Mailing Address:

13605 SW 149 AVE.
SUITE #12
MIAMI, FL 33196

FEI Number: 06-1710456 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:

MUELLE, ERIK ESQ
2100 CORAL WAY, STE. 502
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

CASTILLO, MIGUEL A
13605 SW 149 AVE.
SUITE #12
MIAMI, FL 33196 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: MIGUEL A CASTILLO

04/04/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MIGUEL ANGEL CASTILL, O
Address: 5701 COLLINS AVE., APT. 708
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR () Delete
Name: CASTILLO, VERANIA
Address: 5701 COLLINS AVE., APT. 708
City-St-Zip: MIAMI BEACH, FL 33140

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 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: MIGUEL A CASTILLO

MGR

04/04/2007

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