

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000039345

FILED
Nov 12, 2007
Secretary of State

Entity Name: NAVAL INTERNATIONAL REPAIRS LLC

Current Principal Place of Business:

7821 DELPHIA STREET
ORLANDO, FL 32807

New Principal Place of Business:

6405 CHERRY GROVE CIRCLE
ORLANDO, FL 32809

Current Mailing Address:

7821 DELPHIA STREET
ORLANDO, FL 32807

New Mailing Address:

6405 CHERRY GROVE CIRCLE
ORLANDO, FL 32809

FEI Number: 20-0311330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRACIELA, MONTERO V MRS.
7821 DELPHIA STREET
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

GRACIELA, MONTERO V MRS.
6405 CHERRY GROVE CIRCLE
ORLANDO, FL 32809 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: GRACIELA V. MONTERO

11/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: S.E.A. SERVICIO ELEC, TRONAVAL ARGENTINO S.R
Address: DORREGO 4651 MUNRO PROVINCE
City-St-Zip: BUENOS AIRES, ARGENTINA,

Title: MGRM (X) Delete
Name: ECHEVARRIA, EDWARD
Address: 7821 DELPHIA STREET
City-St-Zip: ORLANDO, FL 32807

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: GRACIELA V. MONTERO

MGRM

11/12/2007

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