

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000040025

FILED
Oct 10, 2005
Secretary of State

Entity Name: ALBERTO SPINELLI CAPITAL LLC

Current Principal Place of Business:

540 15TH STREET, APT. 201
MIAMI BEACH, FL 33139

New Principal Place of Business:

1200 WEST AVENUE SUITE 1629
MIAMI BEACH, FL 33139

Current Mailing Address:

540 15TH STREET, APT. 201
MIAMI BEACH, FL 33139

New Mailing Address:

1200 WEST AVENUE SUITE 1629
MIAMI BEACH, FL 33139

FEI Number: 75-3134359 **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:

SPINELLI, ALBERTO
540 15TH STREET, APT. 201
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

SPINELLI, ALBERTO
1200 WEST AVENUE SUITE 1629
MIAMI BEACH, FL 33139 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: ALBERTO SPINELLI

10/10/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SPINELLI, ALBERTO
Address: 540 15TH STREET, APT. 201
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SPINELLI, ALBERTO
Address: 1200 WEST AVENUE SUITE 1629
City-St-Zip: MIAMI BEACH, FL 33139

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: ALBERTO SPINELLI

MGR

10/10/2005

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