

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000040200

Entity Name: WKJ INVESTMENTS, L.L.C.

FILED  
Sep 28, 2006  
Secretary of State

**Current Principal Place of Business:**

12915 SW 132 STREET  
BLDG#6 UNIT#5  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

12915 SW 132 STREET BLDG#6 UNIT#5  
MIAMI, FL 33186

**New Mailing Address:**

FEI Number: 20-0319201      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:**

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

SANCHEZ, WILLIAM J  
12915 SW 132 STREET BLDG#6 UNIT#5  
MIAMI, FL 33186 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: WILLIAM J. SANCHEZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SANCHEZ, WILLIAM J  
Address: 12915 SW 132 STREET BLDG#6 UNIT#5  
City-St-Zip: MIAMI, FL 33186

Title: MGRM ( ) Delete  
Name: OBIAS-SANCHEZ, IRENE  
Address: 12915 SW 132 STREET BLDG#6 UNIT#5  
City-St-Zip: MIAMI, FL 33186

**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: IRENE OBIAS-SANCHEZ

MRS

09/28/2006

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