

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000041088

FILED
Feb 28, 2005
Secretary of State

Entity Name: FITTIPALDI EXECUTIVE CENTER I, LLC

Current Principal Place of Business:

1001 BRICKELL BAY DR, 9TH FLOOR
ATTN: EMERSON FITTIPALDI
MIAMI, FL 33131

New Principal Place of Business:

123 SE 3RD AVENUE
SUITE # 352
MIAMI, FL 33131

Current Mailing Address:

1001 BRICKELL BAY DR, 9TH FLOOR
ATTN: EMERSON FITTIPALDI
MIAMI, FL 33131

New Mailing Address:

123 SE 3RD AVENUE
SUITE # 352
MIAMI, FL 33131

FEI Number: 20-0339644 **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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

MORRISON, BROWN, ARGIZ & FARRA
1001 BRICKELL BAY DR, 9TH FLOOR
MIAMI, FL 33131 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: MORRISON, BROWN, ARGIZ & FARRA
Electronic Signature of Registered Agent

02/28/2005
Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: FITTIPALDI, EMERSON
Address: 735 CRANDON BLVD. LAKE VILLA II, 503
City-St-Zip: KEY BISCAYNE, FL 33149

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: EMERSON FITTIPALDI MGRM 02/28/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date