

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000042617

Entity Name: NORTH GATE, LLC

FILED
Dec 06, 2006
Secretary of State

Current Principal Place of Business:

1100 N. FEDERAL HWY
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

18851 N.E. 29 AVE.
105
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 87-0715459 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:

LEOPOLD, KORN & LEOPOLD, P.A.
20801 BISCAYNE BLVD.
SUITE 501
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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: LEOPOLD KORN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARREIRO, PABLO
Address: 18851 NE 29 AV SUITE 105
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR () Delete
Name: LORENZINO, JUAN PABLO
Address: 18851 NE 29 AV SUITE 105
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BARREIRO, PABLO
Address: 18851 N.E. 29TH AVENUE SUITE #105
City-St-Zip: AVENTURA, FL 33180 US

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: PABLO BARREIRO

MGR

12/06/2006

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