2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000003481

Entity Name: CITY REALTY, L.L.C

Name:

Address:

City-St-Zip:

GARCIA, ALVARO PIO

MIAMI, FL 33015

6065 NW 167 ST SUITE B-12

FILED Dec 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6065 NW 167 STREET, SUITE B12 MIAMI, FL 33015 **Current Mailing Address: New Mailing Address:** 6065 NW 167 STREET, SUITE B12 MIAMI, FL 33015 FEI Number: 20-0594672 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: LACOUTURE, DANIEL E SR. 6065 NW 167 ST SUITE B-12 MIAMI, FL 33015 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: DANIEL E LACOUTURE SR Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete LACOUTURE, DANIEL Name: Name: Address: 6065 NW 167 ST SUITE B12 Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: OSORIO, ALBA LUCIA Name: Address: 6065 NW 167 ST SUITE B12 Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: Title: MGR () Delete Title: () Change () Addition STRUSS, GLORIA Name: Name: 6065 NW 163 ST SUITE B-12 Address: Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DANIEL E LACOUTURE SR MGR 12/08/2009