

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000004663

FILED
Nov 13, 2009
Secretary of State

Entity Name: SMART CAPITAL MANAGEMENT, L.L.C.

Current Principal Place of Business:

5201 BLUE LAGOON DRIVE, PH
MIAMI, FL 33126

New Principal Place of Business:

1031 IVES DAIRY RD
SUITE 228
MIAMI, FL 33179

Current Mailing Address:

5201 BLUE LAGOON DRIVE, PH
MIAMI, FL 33126

New Mailing Address:

1031 IVES DAIRY RD
SUITE 228
MIAMI, FL 33179

FEI Number: 20-0631201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUEVAS, ANDREW ESQ
CUEVAS & ORTIZ, P.A.
536 BILTMORE WAY
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GIL, JOSE R
1031 IVES DAIRY RD
228
MIAMI, FL 33179 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: JOSE R GIL

11/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GIL, JOSE
Address: 5201 BLUE LAGOON DRIVE, PH
City-St-Zip: MIAMI, FL 33126

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GIL, JOSE R
Address: 1031 IVES DAIRY RD. STE 228
City-St-Zip: MIAMI, FL 33179

Title: MGRM () Change (X) Addition
Name: GIL, MARIA A
Address: 1031 IVES DAIRY RD, STE 228
City-St-Zip: MIAMI, FL 33179

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.

SIGNATURE: JOSE R GIL

MGRM

11/13/2009

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