

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000006345

FILED
May 02, 2006
Secretary of State

Entity Name: GALETTI DEVELOPMENT, LLC

Current Principal Place of Business:

C/O 1500 SAN REMO AVE, STE 103
CORAL GABLES, FL 33146

New Principal Place of Business:

1990 NW 82 AVE
MIAMI, FL 33126

Current Mailing Address:

C/O 1500 SAN REMO AVE, STE 103
CORAL GABLES, FL 33146

New Mailing Address:

1990 NW 82 AVE
MIAMI, FL 33126

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARED, PABLO R ESQ
BARED AND ASSOC., PA
1500 SAN REMO AVE, STE 103
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

RINCON, ROBERTO
1990 NW 82 AVE
MIAMI, FL 33126 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: RINCON ROBERTO

05/02/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PACANINS, CARLOS L SR
Address: C/O 1500 SAN REMO AVE, STE 103
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: HERNANDEZ, EDUARDO
Address: C/O 1500 SAN REMO AVE, STE 103
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: DELGADO, ANTONIO
Address: C/O 1500 SAN REMO AVE, STE 103
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: RICON, ROBERTO
Address: C/O 1500 SAN REMO AVE, STE 103
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: RODRIGUEZ, JULIO
Address: C/O 1500 SAN REMO AVE, STE 103
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: RINCON, ROBERTO
Address: C/O 1500 SAN REMO AVE, STE 103
City-St-Zip: CORAL GABLES, FL 33146

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: RINCON ROBERTO

MGRM

05/02/2006

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