2006 LIMITED LIABILITY COMPANY REINSTATEMENT

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	REINSTA	TEMENT '			Uherr	. ~ 1	10115
1. Entity Name	MENT # L040000237 DWELL, L.L.C.	703			TYPEB 2	^L 4 Aif 9: 4	I
Principal Place 1051 COLLIN MIAMI BEACH	IS AVENUE, SUITE #9	Mailing Address 1051 COLLINS AVENUE, MIAMI BEACH, FL 3313		ol / marinum	4 8811 8781: 8811 8011 8011 8017	a 11888 41112 1884 82488 171	1 23 1 M1 14 3 1
8210	ace of Business BYRON AVENUE	3. Mailing Address	ON AVE	س د			
Suite, Apt.	_ # 25	Suite, Apt. #, etc.		01312006	REIN-LLC C	R2E101 (11/05)	
City & State		City & State Miami BEI	acit, FL	4. FEI Numb 27 -	6086204		pplied For at Applicable
3314	Country	33141	Country	5. Certificate	e of Status Desired [\$5.00 Add Fee Require	
	6. Name and Address of Current F	legistered Agent		7. Name an	d Address of New Regis	tered Agent	
ON DOC LITT	CONTROL OF THE PARTY OF THE PAR		Name	DAVID C	OWELL.	نے رائے کا ا	
1607 N.E.	DENNIS JR.,ESQ 105TH STREET DRES, FL 33138		Street A	ddress (P.O. Box Numl	per is Not Acceptable)	1E #25	
•			City	MAMI BE	ACH	FL Zip Cod	
	named entity submits this statement for ions of registered agent.	the purpose of changing its r	registered office or	registered agent, or b	oth, in the State of Florida	. I am familiar with,	and accept
SIGNATURE .	4H Some	DAVID		OWELL	02-0	6-200 C	6_
FILE NOW!!! FEE IS \$200.00 NOTE: Registered Agent signature required when reinstating) Make check payable to Fiorida Department of State							
FILE	NOW!!! FEE IS \$200.00						e
FILE	NOWIII FEE IS \$200.00	S) MANAGERS	10.			partment of State	e
		A 26 4	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM David C 8210 B	ADDITIONS/CHA	ANGES Change L STE, #	□ Addition
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER		TITLE NAME STREET ADDRESS	DAVID C 8210 B MIAMI	Fiorida De	ANGES Change Σ 575 . Change Change Change	Addition 2.55
9. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBER	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	BAVID BY	ADDITIONS/CHA	ANGES Change STS. # Change Change 104146 -013 **20	Addition 2.55
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