

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000024642

**Entity Name:** LEAL & SECADA, LLC

**FILED**  
**Mar 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9355 GALLARDO ST  
CORAL GABLES, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

9355 GALLARDO ST  
CORAL GABLES, FL 33156

**New Mailing Address:**

**FEI Number:** 04-3818968

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEAL, EDUARDO A  
9355 GALLARDO ST  
CORAL GABLES, FL 33156 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:** EDUARDO A. LEAL

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** SECADA, JUAN  
**Address:** 5175 S.W. 62ND AVE.  
**City-St-Zip:** MIAMI, FL 33155

**Title:** MGR  
**Name:** LEAL, EDUARDO A  
**Address:** 9355 GALLARDO ST  
**City-St-Zip:** CORAL GABLES, FL 33156

I hereby 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:** EDUARDO A. LEAL

PRES

03/07/2011

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