

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000031269

Entity Name: 3700 PONCE, L.L.C.

FILED
Oct 16, 2009
Secretary of State

Current Principal Place of Business:

8603 SOUTH DIXIE HIGHWAY, SUITE 409
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

8603 SOUTH DIXIE HIGHWAY, SUITE 409
MIAMI, FL 33143

New Mailing Address:

FEI Number: 20-2666215 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:

LOGUE, MICHAEL
8603 SOUTH DIXIE HIGHWAY, SUITE 409
MIAMI, FL 33143 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: MICHAEL LOGUE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JOURDIAN, RAY
Address: 801 MADRID STREET, SUITE 203
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: DIAZ, GLADYS M
Address: 801 MADRID STREET, SUITE 203
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: LOGUE, PHILIP
Address: 8603 SOUTH DIXIE, SUITE 409
City-St-Zip: MIAMI, FL 33143

Title: MGRM () Delete
Name: LOGUE, MICHAEL
Address: 8603 SOUTH DIXIE, SUITE 409
City-St-Zip: MIAMI, FL 33143

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

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: MICHAEL LOGUE

MGRM

10/16/2009

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