

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000039029

FILED
Nov 01, 2005
Secretary of State

Entity Name: MIRAMAR GROUP INVESTMENT, LLC

Current Principal Place of Business:

536 BILTMORE WAY
CORAL GABLES, FL 33134

New Principal Place of Business:

7955 N.W. 12TH STREET
SUITE 400
DORAL, FL 33126

Current Mailing Address:

536 BILTMORE WAY
CORAL GABLES, FL 33134

New Mailing Address:

7955 N.W. 12TH STREET
SUITE 400
DORAL, FL 33126

FEI Number: 20-1486143 **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:

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

Name and Address of New Registered Agent:

TAX MANAGEMENT SERVICES CORP
7955 N.W. 12TH STREET
SUITE 400
DORAL, 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: EVELYN CHAPONICK

11/01/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROJAS, MARIA EUGENIA
Address: 536 BILTMORE WAY
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GUTIERREZ, MARIA EUGENIA
Address: 7955 N.W. 12TH STREET, SUITE 400
City-St-Zip: DORAL, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIA EUGENIA GUTIERREZ

MGRM

11/01/2005

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