## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000047578

Entity Name: 2020 LLC

FILED Oct 15, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2000 PONCE DE LEON BLVD. 1240 CASTILLE AVENUE

SUITE 510 CORAL GABLES, FL 33134 US

CORAL GABLES, FL 33134 US

CORAL GABLES, FL 33431 US

**Current Mailing Address: New Mailing Address:** 

2000 PONCE DE LEON BLVD. 1240 CASTILLE AVENUE

SUITE 510 CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 US

FEI Number: 20-2105620 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:

RHODENIZER, SCOTT A RHODENIZER, SCOTT A 1240 CASTILLÉ AVENUE 2000 PONCE DE LEON BLVD. SUITE 510 US CORAL GABLES, FL 33431

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: SCOTT A. RHODENIZER 10/15/2007

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: (X) Change ( ) Addition

RHODENIZER, SCOTT RHODENIZER, SCOTT Name: Name: Address: 2000 PONCE DE LEON BLVD., SUITE 510 Address: 1240 CASTILLE AVENUE City-St-Zip: CORAL GABLES, FL 33134 US City-St-Zip: CORAL GABLES, FL 33134 US

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: SCOTT A. RHODENIZER 10/15/2007