

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000049311

**FILED**  
**Oct 03, 2008**  
**Secretary of State**

**Entity Name:** HAMMERHEAD JAWS, LLC

**Current Principal Place of Business:**

% PETER GUEVARA  
7920 EAST DRIVE  
N BAY VILLAGE, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

% PETER GUEVARA  
PO BOX 22184  
MIAMI, FL 33002

**New Mailing Address:**

**FEI Number:** 04-3819618

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUEVARA, PETER  
7920 EAST DRIVE  
N BAY VILLAGE, FL 33141 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: PETER GUEVARA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PTNR ( ) Delete  
Name: HERNANDEZ, RODOLFO  
Address: 7601 EAST TRAEASURE DRIVE # B-45  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: MM ( ) Delete  
Name: GUEVARA, PETER  
Address: 7920 EAST DRIVE  
City-St-Zip: N BAY VILLAGE, FL 33141

**ADDITIONS/CHANGES:**

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: PETER GUEVARA

MGR

10/03/2008

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