

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000049986

Entity Name: INNOVATIONS P.O.P., LLC

FILED
Oct 17, 2009
Secretary of State

Current Principal Place of Business:

1941 HARBOR VIEW CIRCLE
WESTON, FL 33327

New Principal Place of Business:

7000 ISLAND BLVD
AVENTURA, FL 33160

Current Mailing Address:

1941 HARBOR VIEW CIRCLE
WESTON, FL 33327

New Mailing Address:

7000 ISLAND BLVD
AVENTURA, FL 33160

FEI Number: 34-2002854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CASTANO, ALEJANDRO MGR
1941 HARBOR VIEW CIRCLE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

RAMIREZ, CAMILO MGR
7000 ISLAND BLVD
AVENTURA, FL 33160 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: CR

10/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RAMIREZ, CAMILO
Address: 1941 HARBOR VIEW CIRCLE
City-St-Zip: WESTON, FL 33327

Title: MGR (X) Delete
Name: CASTANO, ALEJANDRO
Address: 1941 HARBOR VIEW CIRCLE
City-St-Zip: WESTON, FL 33327

Title: MGR (X) Delete
Name: CASTANO, ELIANA
Address: 1941 HARBOR VIEW CIRCLE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RAMIREZ, CAMILO
Address: 7000 ISLAND BLVD
City-St-Zip: AVENTURA, FL 33160

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: CAMILO RAMIREZ

MR

10/17/2009

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