

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000050141

**FILED**  
**Oct 05, 2007**  
**Secretary of State**

**Entity Name:** PERFORMING ARTS APARTMENTS, LLC

**Current Principal Place of Business:**

STE 300, GROVE PROFESSIONAL BLDG  
2950 SW 27TH AVE  
MIAMI, FL 33133

**New Principal Place of Business:**

2950 SW 27TH AVE  
SUITE 300  
MIAMI, FL 33133

**Current Mailing Address:**

STE 300, GROVE PROFESSIONAL BLDG  
2950 SW 27TH AVE  
MIAMI, FL 33133

**New Mailing Address:**

**FEI Number:** 20-2144602      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

XIQUES, ALFREDO D  
STE 300, GROVE PROFESSIONAL BLVD  
2950 SW 27 AVENUE  
MIAMI, FL 33133 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: ALFRED XIQUES

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GARCIA, EDUARDO J  
Address: STE 300, GROVE PROFESSIONAL BLDG  
City-St-Zip: MIAMI, FL 33133

Title: MGRM ( ) Delete  
Name: DI CATALDO, JORGE  
Address: STE 300, GROVE PROFESSIONAL BLDG  
City-St-Zip: MIAMI, FL 33133

**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: EDUARDO GARCIA

MGR

10/05/2007

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