

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000074665

**FILED**  
**May 15, 2013**  
**Secretary of State**

**Entity Name:** HARRIS AND ALMONTE HOLDINGS, LLC

**Current Principal Place of Business:**

714 SOUTH STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

714 SOUTH STREET  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:** 20-1855946

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BOHATCH, JOHN S ESQ  
2600 DOUGLAS ROAD PH-8  
CORAL GABLES, FL 33134 US

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

HARRIS, CLAUDE F TRUSTEE  
714 SOUTH STREET  
KEY WEST, FL 33040 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: CLAUDE F. HARRIS

05/15/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HARRIS, CLAUDE F TRUSTEE  
Address: 714 SOUTH STREET  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM  
Name: ALMONTE, PAUL TRUSTEE  
Address: 714 SOUTH STREET  
City-St-Zip: KEY WEST, FL 33040

Title: PRES  
Name: ALMONTE, PAUL A  
Address: 714 SOUTH STREET  
City-St-Zip: KEY WEST, FL 33040

I hereby 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: CLAUDE F. HARRIS

MGRM

05/15/2013

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