

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

2007 APR 30 AM 10:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                   |                                                                                                                                                               |                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # L04000076047</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                                                                              |                                                                                                                                                              |
| 1. Entity Name<br>CILIENTO REALTY FL., LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                   |                                                                                                                                                               |                                                                                                                                                              |
| Principal Place of Business<br>1931 N.E. 34TH COURT<br>LIGHTHOUSE POINT, FL 33064 US                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                   | Mailing Address<br>1941 N.E. 34TH COURT<br>LIGHTHOUSE POINT, FL 33064 US                                                                                      |                                                                                                                                                              |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   | 3. Mailing Address                                                                                                                                            |                                                                                                                                                              |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                   | Suite, Apt. #, etc.                                                                                                                                           |                                                                                                                                                              |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                   | City & State                                                                                                                                                  |                                                                                                                                                              |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Country                                                                                                                           | Zip                                                                                                                                                           | Country                                                                                                                                                      |
| 04242007 REIN-LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                   | CR2E101 (1/07)                                                                                                                                                |                                                                                                                                                              |
| 4. FEI Number<br>20-1843681                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                   | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                        |                                                                                                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                   | \$5.00 Additional Fee Required                                                                                                                                |                                                                                                                                                              |
| 6. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                   | 7. Name and Address of New Registered Agent                                                                                                                   |                                                                                                                                                              |
| CILIENTO, VICENTE S<br>1941 N.E. 34TH COURT<br>LIGHTHOUSE POINT, FL 33064                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                   | Name <u>Vicente Ciliento</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>2900 NE 14 St. #203</u><br>City <u>Pompano Beach</u> FL <u>33062</u> |                                                                                                                                                              |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                            |                                                                                                                                   |                                                                                                                                                               |                                                                                                                                                              |
| SIGNATURE <u>[Signature]</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                   | Vicente Ciliento Pres. 4/25/07                                                                                                                                |                                                                                                                                                              |
| FILE NOW!!! FEE IS \$100.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                   | In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.                                                    |                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                   | Make check payable to<br>Florida Department of State                                                                                                          |                                                                                                                                                              |
| 9. MANAGING MEMBERS/MANAGERS                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                   | 10. ADDITIONS/CHANGES                                                                                                                                         |                                                                                                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGRM<br>CILIENTO, VINCENTE S<br>2900 NE 14 STREET, APT. 203<br>POMPAÑO BEACH, FL 33062 <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                | President<br>Vicente Ciliento<br>2900 NE 14 St. #203<br>Pompano Beach, FL 33062 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGRM<br>CILIENTO, SALVADOR<br>2900 NE 14ST, APT. 803<br>POMPAÑO BEACH, FL 33062 <input checked="" type="checkbox"/> Delete        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                | 800102525785<br>05/15/07--01039--004 **100.00                                                                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGRM<br>CILIENTO, VELIA A<br>2900 NE 14 ST, APT. 203<br>POMPAÑO BEACH, FL 33062 <input type="checkbox"/> Delete                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                | FL <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                                                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                                                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                | REINSTATEMENT 06-07 <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                                                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                            |
| 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>[Signature]</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                   | Vicente Ciliento Pres 4/25/07                                                                                                                                 |                                                                                                                                                              |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                   | Date Day/Mo/Yr                                                                                                                                                |                                                                                                                                                              |