

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000085160

Entity Name: FRUTOS DE LA TIERRA, LLC

FILED
Nov 30, 2009
Secretary of State

Current Principal Place of Business:

2130 ERIN DRIVE
HOLIDAY, FL 34690 US

New Principal Place of Business:

22633 ST THOMAS CIRCLE
LUTZ, FL 33549 US

Current Mailing Address:

2130 ERIN DRIVE
HOLIDAY, FL 34690 US

New Mailing Address:

22633 ST THOMAS CIRCLE
LUTZ, FL 33549 US

FEI Number: 20-1920136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

WOODBIDGE, FREDERICK JR.
7700 N. KENDALL DRIVE
SUITE 809
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

HECTOR, DUQUE
22633 ST THOMAS CIRCLE
LUTZ, FL 33549 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: HECTOR F. DUQUE

11/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OLAYA-ACOSTA, FERNANDO
Address: 2130 ERIN DRIVE
City-St-Zip: HOLIDAY, FL 34690 US

Title: MGR () Delete
Name: BECERRA-ABRIL, OMAR A
Address: 2130 ERIN DRIVE
City-St-Zip: HOLIDAY, FL 34690 US

Title: MGR () Delete
Name: OLAYA-ACOSTA, JOSE EDUARDO
Address: 2130 ERIN DRIVE
City-St-Zip: HOLIDAY, FL 34690

Title: MGR () Delete
Name: DUQUE, HECTOR F
Address: 2130 ERIN DRIVE
City-St-Zip: HOLIDAY, FL 34690

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OLAYA-ACOSTA, FERNANDO
Address: 22633 ST THOMAS CIRCLE
City-St-Zip: LUTZ, FL 33549 US

Title: MGR (X) Change () Addition
Name: BECERRA-ABRIL, OMAR A
Address: 22633 ST THOMAS CIRCLE
City-St-Zip: LUTZ, FL 33549 US

Title: MGR (X) Change () Addition
Name: OLAYA-ACOSTA, JOSE EDUARDO
Address: 22633 ST THOMAS CIRCLE
City-St-Zip: LUTZ, FL 33549

Title: MGR (X) Change () Addition
Name: DUQUE, HECTOR F
Address: 22633 ST THOMAS CIRCLE
City-St-Zip: LUTZ, FL 33549

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: HECTOR F. DUQUE

MGR

11/30/2009

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