

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000085268

FILED
Oct 30, 2006
Secretary of State

Entity Name: INTERNATIONAL MINERAL & MINING, LLC

Current Principal Place of Business:

13605 SOUTHWEST 149 AVE., SUITE 3
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

13605 SOUTHWEST 149 AVE., SUITE 3
MIAMI, FL 33196

New Mailing Address:

FEI Number: 04-3801030 **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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

JACOBS, PATRICIA R MS.
10920 S.W. 134TH COURT
MIAMI, FL 33186 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: PATRICIA R JACOBS

10/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BACKUS, DEXTER
Address: 13605 SOUTHWEST 149 AVE., SUITE 3
City-St-Zip: MIAMI, FL 33196

Title: ST () Delete
Name: BACKUS, GLORIA
Address: 13605 SOUTHWEST 149 AVE., SUITE 3
City-St-Zip: MIAMI, FL 33196

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 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: DEXTER M BACKUS

MR.

10/30/2006

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