

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L04000089447

1. Entity Name
ALEJANDRO GUERRERO, LLC



FILED

2007 APR 30 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
907 W. PENINSULAR STREET
TAMPA, FL 33603 US

Mailing Address
907 W. PENINSULAR STREET
TAMPA, FL 33603 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

04202007 REIN-LLC

CR2E101 (1/07)

4. FEI Number

120-8910224

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name JAMES S. GIARDINA, ESQ

Street Address (P.O. Box Number is Not Acceptable)
3802 W. Bay to Bay Blvd.

Suite 11

City Tampa,

FL

Zip Code
33629

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

(Signature) Typed or printed name of registered agent and title if applicable.

JAMES S. GIARDINA, ESQ

(NOTE: Registered Agent signature required when reinstating)

DATE

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
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
GUERRERO, ALBERTO A
907 W. PENINSULAR STREET
TAMPA, FL 33603 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
200102526802
05/15/07--01039--005 **100.00

TITLE
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REINSTATEMENT 06-07

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

Alberto Alejandro Guerrero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/25/07

Date

813-679-3312

Daytime Phone #