

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000091353

**FILED**  
**Jun 28, 2006**  
**Secretary of State**

**Entity Name:** ATLANTIC HOTELS CONSULTING, LLC

**Current Principal Place of Business:**

1111 BRICKELL AVE.  
SUITE #1100  
MIAMI, FL 33131

**New Principal Place of Business:**

3505 S. OCEAN DRIVE  
SUITE # 1001  
HOLLYWOOD, FL 33019 US

**Current Mailing Address:**

1111 BRICKELL AVE.  
SUITE #1100  
MIAMI, FL 33131

**New Mailing Address:**

3505 S. OCEAN DRIVE  
SUITE # 1001  
HOLLYWOOD, FL 33019 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **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:**

PORRO, CARLOS R  
1111 BRICKELL AVE.  
SUITE #1100  
MIAMI, FL 33131 US

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

PORRO, CARLOS R  
151 CRANDON BLVD  
SUITE # 533  
KEY BISCAYNE, FL 33149 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: CARLOS R. PORRO

06/28/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RIVAS, MOISES  
Address: 3505 S. OCEAN DR. SUITE #100  
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR ( ) Delete  
Name: OPPENHEIM, ROLF  
Address: 4076 STAGHORN LANE  
City-St-Zip: WESTON, FL 33331

Title: MGR ( ) Delete  
Name: CONTRERAS, OSCAR E  
Address: 700 WEST EXPRESSWAY 83  
City-St-Zip: MC ALLEN, TX 18507

Title: MGR ( ) Delete  
Name: PORRO, CARLOS R  
Address: 151 CRANDON BLVD. #533  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MOISES RIVAS

MGR

06/28/2006

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