

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000092675

**FILED**  
**Oct 18, 2005**  
**Secretary of State**

**Entity Name:** COUNTRY CLUB TRUST LLC

**Current Principal Place of Business:**

3211 PONCE DE LEON BLVD STE. 301  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

3211 PONCE DE LEON BLVD STE. 301  
CORAL GABLES, FL 33134

**New Mailing Address:**

**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:**

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

MILTON, JOSE  
3211 PONCE DE LEON BLVD STE. 301  
CORAL GABLES, FL 33134 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: JOSE MILTON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: MILTON, JOSE  
Address: 3211 PONCE DE LEON #301  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSE MILTON

MGRM

10/18/2005

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