

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000015150

Entity Name: FLORENSE/MIAMI, LLC

FILED
Sep 26, 2007
Secretary of State

Current Principal Place of Business:

THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE, SUITE 2400
MIAMI, FL 33131

New Principal Place of Business:

FLORENSE/MIAMI
3925 N MIAMI AVE SUITE 101
MIAMI, FL 33127

Current Mailing Address:

THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE, SUITE 2400
MIAMI, FL 33131

New Mailing Address:

3925 N MIAMI AVE
SUITE 101
MIAMI, FL 33127

FEI Number: 20-2757001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DANIELS, NICHOLAS M ESQ
THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE, SUITE 2400
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

AMINOFF, JOSEPH ESQ
407 LINCOLN RD
SUITE 9A
MIAMI BEACH, FL 33139 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: JOSEPH AMINOFF

09/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PART () Delete
Name: POCZTARUK, ABRAHAM
Address: 3925 N MIAMI AV
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES:

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

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: ABRAHAM POCZTARUK

PART

09/26/2007

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