## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L05000019989

**Entity Name: TWINS DEVELOPMENT LLC** 

FILED Sep 09, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

15369 SOUTH DIXIE HIGHWAY MIAMI, FL 33157

**Current Mailing Address: New Mailing Address:** 

15369 SOUTH DIXIE HIGHWAY MIAMI, FL 33157

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

ARNKOFF, LAWRENCE RINGEL, THOMAS ESQ.

9200 SOUTH DADELAND BLVD., SUITE 614 9130 SOUTH DADELAND BOULEVARD

MIAMI, FL 33156 US SUITE 1225 MIAMI, FL 33156 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: THOMAS RINGEL 09/09/2008

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change ( ) Addition

MAS, JORGE MARTINEZ, ALFONSO A Name: Name: 4825 HAMMOCK LAKE DRIVE Address: C/O THE MAS GROUP, 2901 PONCE DE LEON BLVD Address:

CORAL GABLES, FL 33156 CORAL GABLES, FL 33134

City-St-Zip: City-St-Zip:

Title: MGRM ( ) Delete Title: (X) Change ( ) Addition

Name: MARTINEZ, EDUARDO Name: PEREZ, ALBERTO J

Address: 4523 S.W. 64TH AVE. Address: C/O THE MAS GROUP, 2901 PONCE DE LEON BLVD

City-St-Zip: MIAMI, FL 33155 City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete Title: SEC ( ) Change (X) Addition

MARTINEZ, ALFONSO A Name: Name: Address: Address: 4825 HAMMOCK LAKE DRIVE City-St-Zip: City-St-Zip: CORAL GABLES, FL 33156

Title: () Delete Title: TREA ( ) Change (X) Addition

MARTINEZ, ALFONSO A Name: Name: Address: Address: 4825 HAMMOCK LAKE DRIVE City-St-Zip: City-St-Zip: CORAL GABLES, FL 33156

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: THOMAS RINGEL, ESQ. 09/09/2008