## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000021370  1. Entity Name CARULL INVESTMENTS, LLC							FILE		<b>!</b>	
Principal Place of Business 4865 S.W. 152ND COURT UNIT G MIAMI, FL 33185			Mailing Address 4865 S.W. 152ND COURT UNIT G MIAMI, FL 33185				SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal P	tace of Busine	sss - No P.O. Box #	3. Maiting Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			1005200	7 REIN-LLC	CR2E10	1 (1/07)	
City & State			City & State		4. FEI Nur 04-38	nber 808045		<del></del>	plied For t Applicable	
Zip .	Zip . Country		Zip			5. Certifica	ate of Status Desired		5.00 Add to Require	
ļ	6. Name	and Address of Current R	agistered Agent		None	7. Name a	end Address of New I	Registered Ag	ent	
YARULL.	IAVIFR				Name					
	152ND CC	DURT UNIT G		Street Address (P.O. Box Number is Not Acceptable)						
				City	· · · · · · · · · · · · · · · · · · ·		FL	Zip Code	•	
8. The above	named entity	submits this statement for	the purpose of changing its	ed office or regis	stered agent, or	both, in the State of Fl	lorida. I am far	niliar with,	and accept	
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. SKSNATURE										
Signature, typed or printed name of registered opera and title if applicable. ##OTE: Registered Agent signature required when retreateding? OATE										
FILE NOWILL FEE IS \$60.00 In accordance with a. 607.193(2)(b), F.S., the Refer January 1, 2008, Fee will be \$100.00 liability company did not receive the prior not 9. MANAGING MEMBERS/MANAGERS 10.							Florid	ke check pay la Departmer		l P
9.	MGRM	MANAGING MEMBER		10.			AUDITIONS	/CHANGES		
NAME STREET ADDRESS C/IY-ST-ZIP	YARULL, J	152ND COURT UNIT	Oelete	CHMIE TITLE  MAME  STREET ADDRESS  CITY-S1-2P			8 <b>0011</b> 0 /11/07010	-	] Change -	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP								(	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			☐ Detate					ſ	Change	Addition
TITLE NAME STREET ADDRESS CITY-81-ZIP			☐ Delate	TITU NAM STRE	ET ADDRESS				Change	Addition
TITLE NAME STREET ADDRESS CITY-81-22P			C Delete		E ET ADURESS -ST-ZEP		EMEN		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			C Octobe		1			(	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 onth; that I am a managing member or manager of the firsted flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.										
SIGNATURE: SIGNATURE AND THEO OF PRINTED MADE OF SIGNAL AND AND AND THEO OF SIGNAL AND										