

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000021517

FILED
Oct 08, 2007
Secretary of State

Entity Name: AGU L.L.C.

Current Principal Place of Business:

18246 COLLINS AVENUE
SUNNY ISLES, FL 33160

New Principal Place of Business:

20301 W COUNTRY CLUB DR
2022
AVENTURA, FL 33180 US

Current Mailing Address:

20301 W COUNTRY CLUB DR
AVENTURA, FL 33180

New Mailing Address:

20301 W COUNTRY CLUB DR
2022
AVENTURA, FL 33180 US

FEI Number: 20-2939159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOR, ELIANA
20301 W COUNTRY CLUB DR
#2022
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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: ELIANA SCHOR

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LABOVSKY, CARMEND
Address: 18246 COLLINS AVE
City-St-Zip: SUNNY ISLES, IL 33160

Title: M () Delete
Name: LABOVSKY, BENITO A
Address: 18246 COLLINS AVE
City-St-Zip: SUNNY ISLES, IL 33160

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LABOVSKY, CARMEN D
Address: 20301 W COUNTRY CLUB DR #2022
City-St-Zip: AVENTURA, FL 33180 US

Title: M (X) Change () Addition
Name: LABOVSKY, BENITO A
Address: 20301 W COUNTRY CLUB DR #2022
City-St-Zip: AVENTURA, FL 33180 US

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: CARMEN LABOVSKY

MGR

10/08/2007

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