## 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L05000037531

City-St-Zip:

HIALEAH, FL 33012

Entity Name: J & R 3901 INVESTMENT, LLC

FILED Oct 06, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3901 W. 18 AVENUE, UNIT #906 HIALEAH, FL 33012 **Current Mailing Address: New Mailing Address:** 3901 W. 18 AVENUE, UNIT #906 HIALEAH, FL 33012 FFI 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: NADER, JESSICA 19455 N.W. 79 PLACE MIAMI, FL 33015 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: JESSICA NADER Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PEREZ, RAINER Z Name: Name: Address: 3901 W. 18 AVENUE, UNIT #906 Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: NADER, JESSICA Name: Address: 3901 W. 18 AVENUE, UNIT #906 Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition NADER, YOLANDA Name: Name: 3901 W. 18 AVENUE, UNIT #906 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: JESSICA NADER MGR 10/06/2006