

**2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 03, 2008  
Secretary of State**

DOCUMENT# L05000039015

Entity Name: AUBER, L.L.C.

**Current Principal Place of Business:**

590 CURTISS PARKWAY  
MIAMI SPRINGS, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

590 CURTISS PARKWAY  
MIAMI SPRINGS, FL 33166

**New Mailing Address:**

FEI Number: 20-2760484      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEFEBVRE, PATRICIA  
590 CURTISS PARKWAY  
MIAMI SPRINGS, FL 33166      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: PATRICIA LEFEBVRE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: LEFEBVRE, JACQUES L  
Address: 590 CURTISS PARKWAY  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: MGR      ( ) Delete  
Name: LEFEBVRE, PATRICIA M  
Address: 590 CURTISS PARKWAY  
City-St-Zip: MIAMI SPRINGS, FL 33166

**ADDITIONS/CHANGES:**

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

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: PATRICIA LEFEBVRE

AGEN

10/03/2008

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