

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000046866

Entity Name: VILLA DOLPHIN LLC

FILED  
Oct 11, 2006  
Secretary of State

## Current Principal Place of Business:

2700 GLADES CIRCLE  
119  
WESTON, FL 33327

## New Principal Place of Business:

2700 GLADES CIRCLE  
SUITE 119  
WESTON, FL 33327

## Current Mailing Address:

2700 GLADES CIRCLE  
119  
WESTON, FL 33327

## New Mailing Address:

2700 GLADES CIRCLE  
SUITE 119  
WESTON, FL 33327

FEI Number: 20-2823100      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

VARGAS, GUILLERMO  
2700 GLADES CIRCLE  
119  
WESTON, FL 33327 US

## Name and Address of New Registered Agent:

VARGAS, GUILLERMO  
2700 GLADES CIRCLE  
SUITE 119  
WESTON, FL 33327 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: GUILLERMO VARGAS

10/11/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: PRO-INVESTMENTS LLC,  
Address: 2700 GLADES CIRCLE # 119  
City-St-Zip: WESTON, FL 33327

Title: MGRM ( ) Delete  
Name: ASCARLO INVESTMENT G, ROUP LLC  
Address: 2549 JARDIN LANE  
City-St-Zip: WESTON, FL 33327

Title: MGRM ( ) Delete  
Name: ALVAREZ, FERNANDO  
Address: 3259 SOMMERSET  
City-St-Zip: WESTON, FL 33332

Title: MGRM ( ) Delete  
Name: ALVAREZ, CLAUDIA  
Address: 3259 SOMMERSET  
City-St-Zip: WESTON, FL 33332

## ADDITIONS/CHANGES:

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

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

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 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: PRO INVESTMENT

MGRM

10/11/2006

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