

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000050746

Entity Name: IMPACT GLASS SYSTEMS LLC

FILED
Oct 07, 2007
Secretary of State

Current Principal Place of Business:

3421 NW 17 ST
MIAMI, FL 33125 US

New Principal Place of Business:

Current Mailing Address:

3421 NW 17 ST
MIAMI, FL 33125 US

New Mailing Address:

FEI 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:

VILLAR, JACOBO
8035SW 15 ST
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

DIAZ, ALBERTO J
3421 NW 17TH STREET
MIAMI, FL 33125 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: ALBERTO JUAN DIAZ

10/07/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DIAZ, ALBERTO J
Address: 3421 NW 17 ST
City-St-Zip: MIAMI, FL 33125 US

Title: MGR () Delete
Name: DIAZ, ALBERTO J JR
Address: 3421 NW 17 ST
City-St-Zip: MIAMI, FL 33125 US

Title: MGR () Delete
Name: PEREIRA, REINA
Address: 3421 NW 17 ST
City-St-Zip: MIAMI, FL 33125 US

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:

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: ALBERTO J DIAZ

MGR

10/07/2007

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