## 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L05000052117

Entity Name: SUNDOTCOM MIRADOR, LLC

FILED Oct 02, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 17471 SW 35TH STREET MIRAMAR, FL 33029 **Current Mailing Address: New Mailing Address:** 17471 SW 35TH STREET MIRAMAR, FL 33029 FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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: Name and Address of New Registered Agent: BECERRA, CARLOS 17471 SW 35TH STREET MIRAMAR, FL 33029 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: CARLOS BECERRA Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete BECERRA, CARLOS Name: Name: 17471 SW 35TH STREET Address: Address: MIRAMAR, FL 33029 City-St-Zip: City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition JALBERT, NANCY Name: Name: Address: 900 BAY DRIVE, 513 Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition EREZ, SAMMY Name: Name: 1000 WEST AVENUE, 603 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition KATZ, DAVID Name: Name: 1000 WEST AVENUE Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition KATZ, MATT Name: Name: 2392 NOSTRAND AVENUE Address: Address: City-St-Zip: BROOKLYN, NY 11210 City-St-Zip: Title: (X) Delete Title: () Change () Addition PULTMAN, ABE Name: Name: Address: 2392 NOSTRAND AVENUE Address: BROOKLYN, NY 11210 City-St-Zip: 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: CARLOS BECERRA MGR 10/02/2006