

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000053957

FILED  
Oct 04, 2007  
Secretary of State

Entity Name: L'SOLEI DEVELOPMENTS GROUP, LLC

**Current Principal Place of Business:**

801 BRICKELL AVE., SUITE 930  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

801 BRICKELL AVE., SUITE 930  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 22-3914660      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

HABER, ROBERT M ESQ.  
C/O FREEMAN, HABER, ET AL  
520 BRICKELL KEY DRIVE, SUITE O-305  
MIAMI, FL 33131 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: HABER, ROBERT M ESQ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ARCILA, NAH G  
Address: 100 NE 1ST CT  
City-St-Zip: HALLANDALE, FL 33009

Title: MGRM ( ) Delete  
Name: MANECHA, CARLOS  
Address: 1100 N.E 1ST CT  
City-St-Zip: HALLANDALE, FL 33009

Title: MGRM ( ) Delete  
Name: VALLEJO, JUAN D  
Address: 1100 N.E. 1ST CT.  
City-St-Zip: HALLANDALE, FL 33009

**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: ARCILA, NAH, G

MGRM

10/04/2007

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