2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000059946

1. Entity Name
GAJERHAR BUILDERS, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 NOV 13 AM 9:53

800081745368

11072006 REIN-LLC CR2E101 (11/05)

Principal Place of Business	Mailing Address
901 PONCE DE LEON BLVD., PENTHOUSE SUITE CORAL GABLES, FL 33134	901 PONCE DE LEON BLVD., PENTHOUSE SUITE CORAL GABLES, FL 33134

2. Principal Place of Business		3. Mailing Address	
201 Crandon Boulevard		201 Crandon Boulevard	
Suite, Apt. #, etc.: #528		Suite, Apt. #, etc.: #528	
City & State: Key Biscayne, Florida		City & State: Key Biscayne, Florida	
Zip: 33149-1521	Country: U.S.A.	Zip: 33149-1521	Country: U.S.A.

4. FEI Number ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BLACK, ROBERT J
901 PONCE DE LEON BLVD., PENTHOUSE SUITE
CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] 11/7/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After January 1, 2007, Fee will be $200.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR/MEMBER JOSE FURIATI 201 Crandon Blvd, #528 Key Biscayne, Florida 33149 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition REINSTATEMENT 2006

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: [signature] Managing Member 11/7/2006 305-303-4808
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

JOSE FURIATI

TOTAL P.03

CORPORATION SERVICE COMPANY®

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 NOV 13 AM 9:53

ACCOUNT NO. : 072100000032

REFERENCE : 595967 82273A

AUTHORIZATION :

COST LIMIT : $ 150.00

ORDER DATE : November 13, 2006

ORDER TIME : 3:56 PM

ORDER NO. : 595967-010

CUSTOMER NO: 82273A

DOMESTIC FILINGS

F. 4
1st

NAME: GAJERHAR BUILDERS, L.L.C.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - Ext# 2933

EXAMINER'S INITIALS _____