

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000068567

FILED
Feb 16, 2009
Secretary of State

Entity Name: PAIVA & PAIVA INVESTMENT GROUP LLC

Current Principal Place of Business:

1251 WATER WAY COVE
WELLINGTON, FL 33414 US

New Principal Place of Business:

12077 REGAL CT W
A
WELLINGTON, FL 33414 US

Current Mailing Address:

1251 WATER WAY COVE
WELLINGTON, FL 33414 US

New Mailing Address:

12077 REGAL CT W
A
WELLINGTON, FL 33414 US

FEI Number: 16-1755616 **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:

NANCY, CASTILLO
1251 WATER WAY COVE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

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: RAFAEL A PAIVA

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ARGENIS, PAIVA SR
Address: 1251 WATER WAY COVE
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGR () Delete
Name: RAFAEL, PAIVA
Address: 12077 REGAL CT W
City-St-Zip: WELLINGTON, FL 33414 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ARGENIS, PAIVA SR
Address: 12134 REGAL CT EAST
City-St-Zip: WELLINGTON, FL 33414 US

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: RAFAEL A PAIVA

MGR

02/16/2009

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