

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000093550

Entity Name: CARRAVEN, LLC

FILED
Sep 22, 2006
Secretary of State

Current Principal Place of Business:

1001 BRICKELL BAY DR
#3104
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1001 BRICKELL BAY DR
#3104
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-3518259 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:

PB & LQ FINANCIAL CONSULTING
1101 BRICKELL AV
1801
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: PB&LQ FINANCIAL CONSULTING

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ISABEL, MONTIEL D OSIO
Address: 1001 BRICKELL BAY DR
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: DAVID, OSIO
Address: 1001 BRICKELL BAY DR
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: ISABEL, OSIO
Address: 1001 BRICKELL BAY DR
City-St-Zip: MIAMI, FL 33131

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 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: DAVID OSIO

MGR

09/22/2006

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