

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000095182

Entity Name: 20621 SW 125 AVENUE, LLC

FILED
Oct 06, 2006
Secretary of State

Current Principal Place of Business:

1082 SAN LUIS REY
WESTON, FL 33326 US

New Principal Place of Business:

10300 SW 72ND STREET
318
MIAMI, FL 33173 US

Current Mailing Address:

1082 SAN LUIS REY
WESTON, FL 33326 US

New Mailing Address:

10300 SW 72ND STREET
318
MIAMI, FL 33173 US

FEI Number: 20-3543507 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:

LAVERDE, ALFREDO
1082 SAN LUIS REY
WESTON, FL 33326 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: ALFREDO LAVERDE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LAVERDE, ALFREDO
Address: 1082 SAN LUIS REY
City-St-Zip: WESTON, FL 33326 US

Title: MGRM () Delete
Name: PARRILLAS OF DAVIE., LC
Address: 5001 S UNIVERSITY DRIVE, K
City-St-Zip: FORT LAUDERDALE, FL 33328 US

ADDITIONS/CHANGES:

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: ALFREDO LAVERDE

MGRM

10/06/2006

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