

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000101426

FILED
Sep 18, 2007
Secretary of State

Entity Name: REFLECTIONS ON THE RIVER LLC

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE
SUITE 703
MIAMI, FL 33133

New Principal Place of Business:

1110 BRICKELL AVE SUITE 810
MIAMI, FL 33131

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE
SUITE 703
MIAMI, FL 33133

New Mailing Address:

1110 BRICKELL AVE SUITE 810
MIAMI, FL 33131

FEI Number: 20-4474346 **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:

WORLD CORPORATE SERVICES, INC.
2665 SOUTH BAYSHORE DRIVE
SUITE 703
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

OMEGA ALPHA DEVELOPMENT LLC
1110 BRICKELL AVE SUITE 810
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: OMEGA ALPHA DEVELOPMENT LLC

09/18/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ACOSTA, ALFREDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 703
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ACOSTA, ALFREDO
Address: 1110 BRICKELL AVE SUITE 810
City-St-Zip: MIAMI, FL 33131

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: ALFREDO ACOSTA

MGR

09/18/2007

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