

**2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 19, 2006  
Secretary of State**

DOCUMENT# L05000104121

Entity Name: SUSANAR LLC

**Current Principal Place of Business:**

1300 CAMELLIA CIRCLE  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1300 CAMELLIA CIRCLE  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 20-4570133      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

GALVIS, SILVIA  
1300 CAMELLIA CIRCLE  
WESTON, FL 33326      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: SILVIA GALVIS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: GALVIS, SILVIA  
Address: 1300 CAMELLIA CIRCLE  
City-St-Zip: WESTON, FL 33326

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: SILVIA GALVIS

MGR

10/19/2006

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