2008 LIMITED LIABILITY COMPANY

FILED
May 16, 2008 8:00 am
Secretary of State
05-16-2008 90190 003 ***138.75

DOCUMENT # L05000106658

1. Entity Name

A L A C INVESTMENT LLC

Principal Place of Business	Mailing Address
8895 FONTAINEBLEAU BLVD # 409 MIAMI, FL 33172	8895 FONTAINEBLEAU BLVD # 409 MIAMI, FL 33172

DO NOT WRITE IN THIS SPACE

03062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3737056 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GEORGIA REYES
2828 CORAL WAY # 300
MIAMI, FL 33145

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	ALBERTO MANOSALVA
STREET ADDRESS	8895 FONTAINEBLEAU BLVD # 409
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	MGR
NAME	LEONARDO MANOSALVA
STREET ADDRESS	8895 FONTAINEBLEAU BLVD # 409
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	MGR
NAME	ALBERTO J. MANOSALVA
STREET ADDRESS	8895 FONTAINEBLEAU BLVD # 409
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	MGR
NAME	CARLOS MANOSALVA
STREET ADDRESS	8895 FONTAINEBLEAU BLVD # 409
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ 04/23/08 305-443-9695
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

Mar 06 2008 2:32 ECFS 3054449977 p.2