

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000002288

Entity Name: FADIORI, LLC.

FILED  
Nov 02, 2007  
Secretary of State

**Current Principal Place of Business:**

3560 NW 115TH AVENUE  
DORAL, FL 33178

**New Principal Place of Business:**

9831 NW 58 ST.  
SUITE 148  
DORAL, FL 33178

**Current Mailing Address:**

3560 NW 115TH AVENUE  
DORAL, FL 33178

**New Mailing Address:**

9831 NW 58 ST.  
SUITE 148  
DORAL, FL 33178

FEI Number: 14-1946108      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:**

ALCESTE, OTILIA  
13560 S.W. 99TH STREET  
MIAMI, FL 33186 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: OTILIA ALCESTE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: FRANSCECHI, MA. DEL PILAR  
Address: 12120 S.W. 88TH AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: MGRM ( ) Delete  
Name: ALCESTE, OTILIA  
Address: 13560 S.W. 99TH STREET  
City-St-Zip: MIAMI, FL 33186

**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 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: MARIA DEL PILAR FRANCESCHI

MRS.

11/02/2007

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