

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000008732

FILED
Jan 31, 2008
Secretary of State

Entity Name: CUSTOM MIRROR FRAMES, LLC

Current Principal Place of Business:

523 WOODGATE CIRCLE
SUNRISE, FL 33326

New Principal Place of Business:

Current Mailing Address:

523 WOODGATE CIRCLE
SUNRISE, FL 33326

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

Name and Address of New Registered Agent:

LEMUS, LEONEL
523 WOODGATE CIRCLE
SUNRISE, 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: LEONEL LEMUS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEMUS, LEONEL
Address: 523 WOODGATE CIRCLE
City-St-Zip: SUNRISE, FL 33326

Title: MGR () Delete
Name: GAVIRIA, JORGE A
Address: 504 WOODGATE CIRCLE
City-St-Zip: SUNRISE, FL 33326

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: LEONEL LEMUS

DM

01/31/2008

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