

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000011102

Entity Name: EXOTIC TREE CARE LLC

FILED
Oct 09, 2007
Secretary of State

Current Principal Place of Business:

16029 N W 82ND PLACE
MIAMI LAKES, FL 33016

New Principal Place of Business:

8924 NW 194 TERR
MIAMI LAKES, FL 33018

Current Mailing Address:

16029 N W 82ND PLACE
MIAMI LAKES, FL 33016

New Mailing Address:

8924 NW 194 TERR
MIAMI LAKES, FL 33018

FEI Number: 20-4264731 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:

DE LA TORRE, GRACE
16029 N W 82ND PLACE
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

CALZADILLA, GRACE
8924 NW 194 TERR
MIAMI LAKES, FL 33018 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: GRACE CALZADILLA

10/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DE LA TORRE, GRACE
Address: 16029 N W 82ND PLACE
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DE LA TORRE, RODOLFO JR
Address: 8924 NW 194 TERR
City-St-Zip: MIAMI LAKES, FL 33018

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: RODOLFO DE LA TORRE

MGRM

10/09/2007

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