

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000026085

**FILED**  
**Jan 15, 2009**  
**Secretary of State**

**Entity Name:** 450 SW 16TH AVENUE, L.L.C.

**Current Principal Place of Business:**

450 SW 16TH AVE  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

904 SW 23 AVE  
MIAMI, FL 33135

**New Mailing Address:**

2700 SW 8 ST  
MIAMI, FL 33135

**FEI Number:** 20-4468683      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

DEMETRIO J. PEREZ & ASSOCIATES, P.A.  
904 SW 23RD AVE  
200  
MIAMI, FL 33135 US

**Name and Address of New Registered Agent:**

DEMETRIO J. PEREZ & ASSOCIATES, P.A.  
2700 SW 8 ST  
202  
MIAMI, FL 33135 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: DEMETRIO J PEREZ

01/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DP REAL ESTATE HOLDI, NGS, L.L.C.  
Address: 904 SW 23 AVE  
City-St-Zip: MIAMI, FL 33135

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DP REAL ESTATE HOLDI, NGS, L.L.C.  
Address: 2700 SW 8 ST  
City-St-Zip: MIAMI, FL 33135

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: DEMETRIO PEREZ

CR

01/15/2009

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