

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000026098

Entity Name: REVERSIFY, LLC

FILED  
May 19, 2008  
Secretary of State

## Current Principal Place of Business:

335 SW 18 RD  
MIAMI, FL 33129

## New Principal Place of Business:

7306 COLLINS AVE  
STE 108  
MIAMI BEACH, FL 33141

## Current Mailing Address:

335 SW 18 RD  
MIAMI, FL 33129

## New Mailing Address:

7306 COLLINS AVE  
STE 108  
MIAMI BEACH, FL 33141

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REVERSIFY, LLC  
335 SW 18 RD  
MIAMI, FL 33129 US

## Name and Address of New Registered Agent:

JAIME, ROJAS  
7306 COLLINS AVE  
STE 108  
MIAMI BEACH, FL 33141 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: JAIME ROJAS

05/19/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ROJAS, JAIME A JR  
Address: 335 SW 18 RD  
City-St-Zip: MIAMI, FL 33129

Title: MGR (X) Delete  
Name: FUENTES, MARIELA  
Address: 335 SW 18 RD  
City-St-Zip: MIAMI, FL 33129

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: ROJAS, JAIME JR  
Address: 7306 COLLINS AVE STE#108  
City-St-Zip: MIAMI BEACH, FL 33141

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: JAIME ROJAS

MGR

05/19/2008

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