## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L06000028462

Entity Name: DR. FLUORIDE FREE, LLC

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5582 NE 4TH COURT, LOFT 6 90 ALTON ROAD 2601

MIAMI, FL 33137

MIAMI BEACH, FL 33139

**Current Mailing Address: New Mailing Address:** 

5582 NE 4TH COURT, LOFT 6 90 ALTON ROAD

MIAMI, FL 33137 2601

MIAMI BEACH, FL 33139

FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent:

BRAGA, VALERIA 5582 NE 4TH COURT, LOFT 6 BRAGA, VALERIA 90 ALTÓN ROAD

MIAMI, FL 33137 2601 MIAMI BEACH, FL 33139 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: VALERIA BRAGA 04/30/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

BRAGA, VALERIA Name: Name: Address: 90 ALTON ROAD, #2601 Address: City-St-Zip: MIAMI, FL 33139 City-St-Zip:

Title: MGRM ( ) Delete Title: () Change () Addition

ACPZ VENTURE CAPITAL, COMPANY Name: Name: Address: 1308 DELAWARE AVENUE Address: City-St-Zip: WILMINGTON, DE City-St-Zip:

Title: MGRM ( ) Delete Title: () Change () Addition

MIARECKI, MICHAEL J Name: Name: 5582 NE 4TH COURT, LOFT 6 Address: Address: City-St-Zip: MIAMI, FL 33137 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: VALERIA BRAGA 04/30/2008