

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000033738

Entity Name: BFP, LLC

**FILED**  
**Apr 10, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

9737 NW 41ST STREET #615  
MIAMI, FL 331782924

**New Principal Place of Business:**

**Current Mailing Address:**

9737 NW 41ST STREET #615  
MIAMI, FL 331782924

**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:**

CABANAS & ASSOCIATES P.A.  
10520 NW 26TH STREET, SUITE C-201  
DORAL, FL 33172 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: JOE CABANAS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FONSECA, JUAN CARLOS  
Address: 10556 NW 26TH STREET, SUITE D 101  
City-St-Zip: DORAL, FL 33172

**ADDITIONS/CHANGES:**

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: JUAN CARLOS FONSECA

MGR

04/10/2008

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