

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000034715

**FILED**  
**Nov 18, 2011**  
**Secretary of State**

**Entity Name:** VIEQUES DEVELOPMENT PARTNERS, LLC

**Current Principal Place of Business:**

231 EVEREST POINT  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

231 EVEREST POINT 105  
CASSELBERRY, FL 32707

**Current Mailing Address:**

231 EVEREST POINT  
CASSELBERRY, FL 32707

**New Mailing Address:**

**FEI Number:** 20-4742522      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SILVA-SPITALNIK, AMY  
231 EVEREST POINT  
CASSELBERRY, FL 32707      US

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

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: AMY SILVA-SPITALNIK

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** AMY SILVA-SPITALNIK  
**Address:** 231 EVEREST POINT 105  
**City-St-Zip:** CASSELBERRY, FL 32707

I hereby 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: AMY SILVA-SPITALNIK

MGR

11/18/2011

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