## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L06000039306

Entity Name: ECLA INVESTMENTS, LLC

FILED Dec 10, 2007 Secretary of State

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

5488 NW 90TH TERRACE SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

5488 NW 90TH TERRACE SUNRISE, FL 33351

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

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:

ALCE, JEAN-MAX 5488 NW 90TH TERRACE SUNRISE, FL 33351 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: JEAN-MAX ALCE

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MR. (X) Change ( ) Addition

 Name:
 ALCE, JEAN-MAX
 Name:
 ALCE, JEAN-MAX

 Address:
 5488 NW 90TH TERRACE
 Address:
 5488 NW 90TH TERRACE

 City-St-Zip:
 SUNRISE, FL 33351 US
 City-St-Zip:
 SUNRISE, FL 33351 US

Title: MGRM ( ) Delete Title: MRS. (X) Change ( ) Addition

 Name:
 ALCE, FERNELLE F
 Name:
 ALCE, FERNELLE F

 Address:
 5488 NW 90TH TERRACE
 Address:
 5488 NW 90TH TERRACE

 City-St-Zip:
 SUNRISE, FL 33351 US
 City-St-Zip:
 SUNRISE, FL 33351 US

Title: MGRM ( ) Delete Title: MR. (X) Change ( ) Addition

Name: ALCE, MAX J Name: ALCE, MAX J

 Address:
 5488 NW 90TH TERRACE
 Address:
 5488 NW 90TH TERRACE

 City-St-Zip:
 SUNRISE, FL 33351 US
 City-St-Zip:
 SUNRISE, FL 33351 US

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: FERNELLE F. ALCE MR 12/10/2007