

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000046160

**FILED**  
**Nov 11, 2008**  
**Secretary of State**

**Entity Name:** DIANA FAMILY CENTER LLC

**Current Principal Place of Business:**

3399 NW 72 AVENUE  
SUITE 214  
MIAMI, FL 33178 US

**New Principal Place of Business:**

**Current Mailing Address:**

3399 NW 72 AVENUE  
SUITE 214  
MIAMI, FL 33178 US

**New Mailing Address:**

**FEI Number:** 48-1714157      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

ESCOBOSA-ADAMES, ABADIA MS.  
3399 NW 72 AVENUE  
SUITE 214  
MIAMI, FL 33178 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:** ABADIA ESCOBOSA-ADAMES

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

**Title:** MGR      ( ) Delete  
**Name:** ESCOBOSA-ADAMES, ABADIA MS.  
**Address:** 21430 SW 90 COURT  
**City-St-Zip:** MIAMI, FL 33189 US

**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:** ABADIA ESCOBOSA-ADAMES

DIR.

11/11/2008

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