

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 MAY -1 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L06000048242

1. Limited Liability Company's Name

IMPERIAL INVESTMENT GROUP LLC

07

CR2E041 (12/07)

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
10745 NW 23rd Street		10745 NW 23rd Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Miami, Florida		Miami, Florida	
Zip	Country	Zip	Country
33172		33172	

4. State/Country of Formation	
Florida	
5. Date Organized or Qualified To Do Business in Florida	
05/10/2006	
6. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
22-3931588	
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent	
Name SPIEGEL & UTRERA, P.A.	
Street Address (P.O. Box Number is Not Acceptable) 1840 Southwest 22nd Street	
Suite, Apt. #, Etc. 4th Floor	
City	State Zip Code
Miami	FL 33145

☒ A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent By: Natalia Utrera, Vice President
REGISTERED AGENT MUST SIGN

Date 4-30-08

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Zevallos, David	10745 NW 23rd Street	Miami, Florida 33172
S		10745 NW 23rd Street	Miami, Florida 33172
T	Zevallos, David	10745 NW 23rd Street	Miami, Florida 33172

REINSTATEMENT **2007-2008**

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05/14/08--01009--007 **277.50

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager David Zevallos Date 4/30/08 Daytime Phone # 305-506-3454

Typed or printed name of signing Managing Member/Manager David Zevallos, Operating Manager