

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000056101

Entity Name: TAE LLC

FILED
Oct 10, 2007
Secretary of State

Current Principal Place of Business:

417 SOUTH 62ND TERRACE
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

417 SOUTH 62ND TERRACE
HOLLYWOOD, FL 33023

New Mailing Address:

FEI Number: 20-4981124 FEI Number Applied For () FEI Number Not Applicable () 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:

UCROS, ERIKA E
417 SOUTH 62ND TERRACE
HOLLYWOOD, FL 33023 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: ERIKA UCROS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: UCROS, ERIKA B
Address: 417 SOUTH 62ND TERRACE
City-St-Zip: HOLLYWOOD, FL 33023

Title: MGR (X) Delete
Name: SANDOVAL, MATILDE
Address: 5050 NW 7TH STREET, APT. 703
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: HUERGO, ILEANA E
Address: 6331 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33023

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ERIKA UCROS

MGR

10/10/2007

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