

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000067463

**FILED**  
**Jul 29, 2010**  
**Secretary of State**

**Entity Name:** EIN OD MILEVADO I I LLC

**Current Principal Place of Business:**

219 NE 14TH AV. #401  
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

219 NE 14TH AV. #401  
HALLANDALE, FL 33009

**New Mailing Address:**

**FEI Number:** 22-3937766

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JUAN P BECERRA  
219 NE 14TH AV. #402  
HALLANDALE, FL 33009 US

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

JOSEPH BECERRA  
280 S.W. 11 AVE. #16  
HALLANDALE, FL 33009 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: JOSEPH BECERRA

07/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BECERRA NUE, CARLOS A  
Address: 219 NE 14TH AV. #401  
City-St-Zip: HALLANDALE, FL 33009

Title: ST  
Name: BECERRA NUE, CARLOS A JUNIOR  
Address: 219 NE 14TH AV. #401  
City-St-Zip: HALLANDALE, FL 33009

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: CARLOS A. BECERRA NUE

MGR

07/29/2010

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