

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000067950

Entity Name: VILLA VIACCI, LLC

FILED  
Nov 06, 2008  
Secretary of State

**Current Principal Place of Business:**

1743 PARK CENTER DRIVE  
SUITE 340  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

1743 PARK CENTER DRIVE  
SUITE 340  
ORLANDO, FL 32835

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

ASHDJI, STEVE  
1768 PARK CENTER DRIVE  
SUITE 340  
ORLANDO, FL 32835 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: STEVE ASHDJI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: ASHDJI, FOUAD  
Address: 1743 PARK CENTER DRIVE, SUITE 340  
City-St-Zip: ORLANDO, FL 32835

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

Title: MGR ( ) Delete  
Name: SAFDAR, REHAN  
Address: 1743 PARK CENTER DRIVE, SUITE 340  
City-St-Zip: ORLANDO, FL 32835

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

Title: MGR ( ) Delete  
Name: SAIF, INTISSAR  
Address: 1743 PARK CENTER DRIVE, SUITE 340  
City-St-Zip: ORLANDO, FL 32835

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: FOUAD ASHDJI

MGR

11/06/2008

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