

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000077245

**FILED**  
**Feb 24, 2011**  
**Secretary of State**

**Entity Name:** NEW HEIGHTS FAMILY INVESTMENTS LLC

**Current Principal Place of Business:**

5300 NW 77 COURT  
DORAL, FL 33166

**New Principal Place of Business:**

5300 NW 77 COURT  
NW 77CT  
DORAL, FL 33166 DO

**Current Mailing Address:**

5300 NW 77 COURT  
DORAL, FL 33166

**New Mailing Address:**

5300 NW 77 COURT  
NW 77CT  
DORAL, FL 33166 DO

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PEREZ, WILKIE JR.  
5300 NW 77 COURT  
DORAL, FL 33166 US

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

PEREZ, WILKIE  
5300 NW 77 COURT  
NW 77CT  
DORAL, FL 33166 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: WILKIE PEREZ

02/24/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PEREZ, WILKIE  
Address: 5300 NW 77 COURT  
City-St-Zip: DORAL, FL 33166 US

Title: MGR  
Name: GOMEZ MARTINEZ, JOANN  
Address: 5300 NW 77 COURT  
City-St-Zip: DORAL, FL 33166 US

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: WILKIE PEREZ

MGR

02/24/2011

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