2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000079993

Entity Name: JOE LUPO, LLC

FILED Apr 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

555 NE 15 STREET 766 ARTHUR GODFREY ROAD SUITE 200 MIAMI BEACH, FL 33140 US

MIAMI, FL 33132 US

Current Mailing Address: New Mailing Address:

555 NE 15 STREET P.O. BOX 402731

SUITE 200 MIAMI BEACH, FL 33140 US MIAMI, FL 33132 US

FEI Number: 20-5653334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

PEREZ, MIKE

555 NE 15 STREET

507 PRINCE ROAD

ALIQUIDINE EL COORD

SUITE 200 ST. AUGUSTINE, FL 32086 US MIAMI, FL 33132 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: AREANNE BREEDLOVE 04/01/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 LUPO, JOE
 Name:
 LUPO, JOE

 Address:
 555 NE 15 STREET SUITE 200
 Address:
 P.O. BOX 402731

City-St-Zip: MIAMI, FL 33132 US City-St-Zip: MIAMI BEACH, FL 33140 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: KARLAN, SANDY Name: KARLAN, SANDY

 Name:
 KARLAN, SANDY
 Name:
 KARLAN, SANDY

 Address:
 555 NE 15 STREET
 Address:
 P.O. BOX 330217

 City-St-Zip:
 MIAMI, FL 33132 US
 City-St-Zip:
 MIAMI, FL 33233 US

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: JOE LUPO MR. 04/01/2008