

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000092302

FILED
Dec 22, 2009
Secretary of State

Entity Name: POLLO TROPICAL OF NORTH MIAMI, LLC

Current Principal Place of Business:

407 LINCOLN ROAD, SUITE 701
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

2750 NE 185TH STREET
SUITE 303
AVENTURA, FL 33180 US

Current Mailing Address:

407 LINCOLN ROAD, SUITE 701
MIAMI BEACH, FL 33139 US

New Mailing Address:

2750 NE 185TH STREET
SUITE 303
AVENTURA, FL 33180 US

FEI Number: 20-5718011 **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:

PAUL FELDMAN, P.A.
407 LINCOLN ROAD, SUITE 701
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

PAUL FELDMAN, P.A.
2750 NE 185TH STREET
SUITE 303
AVENTURA, FL 33180 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: PAUL FELDMAN

12/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CIMENT, NORMAN
Address: 1665 WASHINGTON AVENUE, 4TH FLOOR
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM () Delete
Name: FELDMAN, PRINCESS
Address: 407 LINCOLN ROAD, SUITE 701
City-St-Zip: MIAMI BEACH, FL 33139 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: FELDMAN, PRINCESS
Address: 2750 NE 185 STREET, SUITE 303
City-St-Zip: AVENTURA, FL 33180 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: PRINCESS FELDMAN

MGRM

12/22/2009

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