## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L06000102845

Entity Name: OWNER ALLIANCE, LLC

FILED Dec 17, 2007 Secretary of State

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

510 SHOTGUN RD., SUITE 150 3880 E. COQUINA WAY WESTON, FL 33332 WESTON, FL 33326

**Current Mailing Address: New Mailing Address:** 

510 SHOTGUN RD., SUITE 150 1304 SW 160TH AVENUE WESTON, FL 33326 #224

WESTON, FL 33326

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

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

TORRES, OSCAR TORRES, OSCAR 510 SHOTGUN RD., SUITE 150 1304 SW 160TH AVENUE WESTON, FL 33326 #224 WESTON, FL 33326 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: OSCAR TORRES 12/17/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

TORRES, OSCAR Name: Name: TORRES, OSCAR Address: 510 SHOTGUN RD., SUITE 150 Address: 1304 SW 160TH AVENUE, #224

WESTON, FL 33326 City-St-Zip: WESTON, FL 33326 City-St-Zip:

( ) Change (X) Addition Title: Title: MGRM () Delete Name: Name: TORRES, TANIA

Address: Address: 1304 SW 160TH AVENUE, #224

City-St-Zip: City-St-Zip: WESTON, FL 33332

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: OSCAR TORRES **MGRM** 12/17/2007