

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000111060

Entity Name: DEL PLATA, LLC

FILED
Apr 14, 2008
Secretary of State

Current Principal Place of Business:

2020 NE 135 STREET
NORTH MIAMI, FL 33181

New Principal Place of Business:

111 SW 5TH AVE
26-0337355
MIAMI, FL 33130

Current Mailing Address:

2020 NE 135 STREET
NORTH MIAMI, FL 33181

New Mailing Address:

111 SW 5TH AVE
MIAMI, FL 33130

FEI Number: 26-0337355 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:

SHERMAN, THOMAS G ESQ
90 ALMERIA AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

RODRIGUEZ, FRANCISCO
111 SW 5TH AVE SUITE 103
MIAMI, FL 33130 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: FRANCISCO RODRIGUEZ

04/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SEGAL, MARCELA
Address: PO BOX 350218
City-St-Zip: MIAMI, FL 33135

Title: MGRM () Delete
Name: RODRIGUEZ, FRANK
Address: 111 S.W. 5TH AVENUE, SUITE 103
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES:

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

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: FRANCISCO RODRIGUEZ

MGMR

04/14/2008

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