2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 01, 2008
Secretary of State

DOCUMENT# L06000114871

Entity Name: DESTINATIONS SHOPPES LLC

Current Principal Place of Business:

800 S. DOUGLAS ROAD
SUITE 105
CORAL GABLES, FL 33134

New Principal Place of Business:

9155 S DADELAND BLVD
SUITE 1208
MIAMI, FL 33156

Current Mailing Address:

800 S. DOUGLAS ROAD
SUITE 105
CORAL GABLES, FL 33134

New Mailing Address:

9155 S DADELAND BLVD
SUITE 1208
MIAMI, FL 33156

FEI Number: **FEI Number Applied For (X)** **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:

STOKES, CRAIG A
800 S. DOUGLAS ROAD
SUITE 105
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

STOKES, CRAIG A
9155 S DADELAND BLVD
SUITE 1208
MIAMI, FL 33156 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: CRAIG A STOKES 10/01/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: GONZALEZ, CARLOS
Address: 239 EAST RIVO ALTO DRIVE
City-St-Zip: MIAMI BEACH, FL 33139 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GONZALEZ, CARLOS
Address: 9155 S. DADELAND BLVD, SUITE 1208
City-St-Zip: MIAMI, FL 33156 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: CARLOS GONZALEZ MGR 10/01/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date