

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000115608

Entity Name: ANDREW LAKES, LLC

FILED  
Apr 27, 2009  
Secretary of State

**Current Principal Place of Business:**

2222 PONCE DE LEON BLVD.  
PENTHOUSE SUITE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

520 BRICKELL KEY DRIVE, SUITE O-305  
MIAMI, FL 33131

**New Mailing Address:**

1110 BRICKELL AVENUE  
310  
MIAMI, FL 33131

FEI Number: 20-5991425      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:**

TRANSGLOBAL CORPORATE ADMINISTRATION, LLC  
520 BRICKELL KEY DRIVE, SUITE O-305  
MIAMI, FL 33131      US

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

NS CORPORATE SERVICES INC.  
1110 BRICKELL AVENUE  
310  
MIAMI, FL 33131 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: NS CORPORATE SERVICES

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: CAMPOS, FERNANDO  
Address: 520 BRICKELL KEY DRIVE, SUITE O-305  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

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: FERNANDO CAMPOS

MGR

04/27/2009

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