

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000122148

Entity Name: BELEN SPICES LLC

FILED
Oct 03, 2007
Secretary of State

Current Principal Place of Business:

1717 NW 79 AVE.
MIAMI, FL 33178

New Principal Place of Business:

3911 SW 160 AVE
103
MIRAMAR, FL 33027

Current Mailing Address:

1717 NW 79 AVE.
MIAMI, FL 33178

New Mailing Address:

3911 SW 160 AVE
103
MIRAMAR, FL 33027

FEI Number: 13-4352150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

REYES, SOLANGE
671 NE 195 STREET
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

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: OLGA JIMENEZ

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JIMENEZ, OLGA L
Address: 1717 NW 79 AVE
City-St-Zip: MIAMI, FL 33178

Title: MGRM () Delete
Name: CORTES, ARTURO
Address: 1717 NW 79 AVE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JIMENEZ, OLGA L
Address: 5308 SW 183 AVE
City-St-Zip: MIRAMAR, FL 3302963 11

Title: MGRM (X) Change () Addition
Name: CORTES, ARTURO
Address: 5308 SW 183 AVE
City-St-Zip: MIRAMAR, FL 3302963 11

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: OLGA JIMENEZ

P

10/03/2007

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