

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000001522

Entity Name: YURIMIA, LLC

FILED
Jun 01, 2009
Secretary of State

Current Principal Place of Business:

MULTICENTRO ESTE, OFC A-33
CHACAO, AV LIBERTADOR
CARACAS MIRANDA, XX 1060 VE

New Principal Place of Business:

Current Mailing Address:

MULTICENTRO ESTE, OFC A-33
CHACAO, AV LIBERTADOR
CARACAS MIRANDA, XX 1060 VE

New Mailing Address:

CCS 84063 / SANTIAGO RAMIREZ
11010 NW 30TH STREET
MIAMI, FL 33172

FEI Number: 83-0475739 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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: THE COMPANY CORPORATION

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RAMIREZ, SANTIAGO J
Address: MULTICENTRO ESTE, OFC A-33
City-St-Zip: CARACAS MIRANDA, XX 1060 VE

Title: MGRM () Delete
Name: RAMIREZ, YURIMIA DE
Address: MULTICENTRO ESTE, OFC A-33
City-St-Zip: CARACAS MIRANDA, XX 1060 VE

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: SANTIAGO RAMIREZ

MR

06/01/2009

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