2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000004236

City-St-Zip: MIAMI, FL 33138 US

Entity Name: ARAS TRADING & DISTRIBUTORS, LLC

FILED Nov 13, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of E	Business:	
7245 NE 4 MIAMI, FL	ITH AVENUE 33138 US			
Current N	lailing Address:	New Mailing Address:	New Mailing Address:	
7245 NE 4 MIAMI, FL	ITH AVENUE 33138 US			
	: 20-8215099 FEI Number Applied For ace with s. 607.193(2)(b), F.S., the limited liabi	() FEI Number Not Applicable () lity company did not receive the prior notice.	Certificate of Status Desired()	
Name and	l Address of Current Registered Age	nt: Name and Address of Ne	w Registered Agent:	
	A, ARNOLD ITH AVENUE 33138 US			
	e named entity submits this statement fo e of Florida.	r the purpose of changing its registered off	ice or registered agent, or both	
SIGNATUI	RE: ARNOLD CASTERA			
	Electronic Signature of Register	ed Agent	Date	
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () Delete CASTERA, ARNOLD 7245 NE 4TH AVE MIAMI, FL 33138 US	Title: () 0 Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete LARAQUE, ASHLEY 7245 NE 4TH AVE MIAMI, FL 33138 US	Title: () 0 Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	MGR (X) Delete PHILIPPE, ELSA D 7245 NE 4TH AVE MIAMI, FL 33138 US	Title: () 0 Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address:	MGR () Delete CASTERA, REGINALD 7245 NE 4TH AVE	Title: () 0 Name: Address:	Change () Addition	

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.

City-St-Zip:

SIGNATURE: ARNOLD CASTERA MGR 11/13/2009