PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

] (TED LIAE COMPAN NSTATEN	Y	The state of the s	Secretar	TMENT OF STATE y of State CORPORATIONS		2010 AUG - 5		
DOCUMENT # L07000004760 1. Limited Liability Company's Name							SEURETMRY TALLAHASSE	E. CLORIDA	
1503 Mosaic Investments, LLC						400184022774 08/04/10-01032-006 **516.25 CR2E041 (05/10)			
•				Office Addres				· · · · · · · · · · · · · · · · · · ·	
Suite, Apt. #, etc Suite,						State/Country of Formation Florida			
2805				•		Date Organized or Qualified			
	City & State City & S				nte		To Do Business in Florida 01/12/2007		
Miami, FL			Miami	Miami, FL			er	✓ Applied For Not Applicable	
^{Zip} 3313	, , , , , , , , , , , , , , , , , , ,		^{Zip} 33131		Country	7. CERTIFICATI	E OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status		
8. Name and Address of Current Registered Agent									
Name Sebastian Jaramillo, Esq.									
Street Address (P.O. Box Number is Not Acceptable) 66 W. Flagler Street									
Suite, Apt. #, Etc. 500									
City Miami State Zip Code 7FL 33130							····		
1. I, being appointed the registered agent of the above named limited liability company, am familiar with and a Signature of Registered Agent RECHARLED AGENT MUST SIGN						accept the obligations of Chapter 608, F.S. Date 08/02/2010			
10. Nam	es and Street	Addresses of Managing N	lembers/Managers	š			,		
Titles	Name of Managing Members/Managers		Street Address of Each Managing Member/Manage			City	/ State / Zip		
MGR	Jose Benito Lacruz Jerez			848 Brickell Drive #280		e #2805	Miami, Fl	L 33131	
MGR	Sebastian Jaramillo			66 W. Flagler Street Suite 500		Suite 500	Miami, FL	33130	
				OF	CASTATE	WENT	08-10		
				1 4 Geo			De 9	,610	
11, E-mail Address: Sebastian@miarnidebtlaw.com									
12. I certifiling the self from Signature of Managing I	fy that I am ma his reinstateme s owed by the nade under oa of Member/Mana	inaging member/hanade ent application the reakin limited liability company to th.	for disployution has	trustee emp been/elimina Information	Date08/0	cation as provide pany name satisfie is true and accura	d for in Chapter 608; F.S. is the requirements of seate. and my signature shot aytime Phone # 7865	ction 608 406, F.S., and that all have the same legal effect	
Typed or printed name of signing Managing Member Manager Sebastian Jaramillo									