2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000005504

Entity Name: SUAREZ COMMERCIAL MANAGEMENT, LLC

FILED Oct 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8650 PONCE DE LEON ROAD
MIAMI, FL 33143

8650 PONCE DE LEON ROAD
MIAMI, FL 33143

US

Current Mailing Address: New Mailing Address:

8650 PONCE DE LEON ROAD MIAMI, FL 33143 WS MIAMI, FL 33143 US

FEI Number: 20-8245331 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: Name and Address of New Registered Agent:

MIAMI CORPORATE SYSTEMS, INC. 283 CATALONIA AVE 2ND FLOOR CORAL GABLES, FL 33134 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: JORGE M. VIGIL

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

 Title:
 MGR
 () Delete

 Name:
 SUAREZ, DANIEL F

 Address:
 8650 PONCE DE LEON ROAD

City-St-Zip: MIAMI, FL 33143

Title: MGR () Delete Name: SUAREZ, ROGELIO

Address: 8650 PONCE DE LEON ROAD

City-St-Zip: MIAMI, FL 33143

Title: MGR () Delete
Name: BLANCO, MAGALY

Address: 8650 PONCE DE LEON ROAD

City-St-Zip: MIAMI, FL 33143

 Title:
 MGR
 () Delete

 Name:
 BLANCO, ALEJANDRO

 Address:
 8650 PONCE DE LEON ROAD

City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition

Name: SUAREZ, DANIEL F

Address: 8650 PONCE DE LEON ROAD

City-St-Zip: MIAMI, FL 33143 US

Title: MGR (X) Change () Addition

Name: SUAREZ, ROGELIO

Address: 8650 PONCE DE LEON ROAD

City-St-Zip: MIAMI, FL 33143 US

Title: MGR (X) Change () Addition

Name: BLANCO, MAGALY

Address: 8650 PONCE DE LEON ROAD

City-St-Zip: MIAMI, FL 33143 US

Title: MGR (X) Change () Addition Name: BLANCO, ALEJANDRO

Address: 8650 PONCE DE LEON ROAD

City-St-Zip: MIAMI, FL 33143 US

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: DANIEL FABIAN SUáREZ MGR 10/09/2009