

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000015637

Entity Name: ARTE CUADRA LLC

FILED  
Apr 07, 2009  
Secretary of State

**Current Principal Place of Business:**

307 LAKEVIEW DRIVE  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

307 LAKEVIEW DRIVE  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 22-3954445      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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

BW&T BUSINESS ADVISERS, INC.  
9050 PINES BLVD.,  
450  
PEMBROKE PINES, FL 33024 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: NAYARIT BRICENO

04/07/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: KALITINA, SVETLANA  
Address: 307 LAKEVIEW DRIVE  
City-St-Zip: WESTON, FL 33326

Title: MGR ( ) Delete  
Name: PAGE, EYAN L  
Address: 307 LAKEVIEW DRIVE  
City-St-Zip: WESTON, FL 33326

**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: SVETLANA KALITINA

MGR

04/07/2009

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