

# 2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000020394

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** MARCELLA PAZ COHEN, LLC

**Current Principal Place of Business:**

1925 BRICKELL AVENUE  
SUITE D-1405  
MIAMI, FL 33129 US

**New Principal Place of Business:**

1925 BRICKELL AVENUE  
SUITE 1405D  
MIAMI, FL 33129 US

**Current Mailing Address:**

POST OFFICE BOX 40-3232  
MIAMI BEACH, FL 33140 US

**New Mailing Address:**

**FEI Number:** 20-8807207      **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:**

COHEN, MARCELLA D  
1925 BRICKELL AVENUE  
SUITE D-1405  
MIAMI, FL 33129 US

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

COHEN, MARCELLA D  
1925 BRICKELL AVENUE  
SUITE 1405D  
MIAMI, FL 33129 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: MCPL

04/21/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: D  
Name: MARCELLA PAZ COHEN, LLC  
Address: PO BOX 40-3232  
City-St-Zip: MIAMI BEACH, FL 33140 US

I hereby 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: MPCL

D

04/21/2010

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