

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000023547

Entity Name: PFF DEVELOPMENTS, LLC

FILED
Oct 21, 2009
Secretary of State

Current Principal Place of Business:

2850 DOUGLAS ROAD, SUITE 400
CORAL GABLES, FL 33134

New Principal Place of Business:

7855 NW 12TH STREET
SUITE 105
MIAMI, FL 33126

Current Mailing Address:

2850 DOUGLAS ROAD, SUITE 400
CORAL GABLES, FL 33134

New Mailing Address:

7855 NW 12TH STREET
SUITE 105
MIAMI, FL 33126

FEI Number: 26-2842635 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:

HERNANDEZ, HECTOR ESQ.
2850 DOUGLAS ROAD, PENTHOUSE SUITE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

HECTOR HERNANDEZ & ASSOCIATES, P.A.
7855 NW 12 STREET
SUITE 105
MIAMI, FL 33126 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: HECTOR HERNANDEZ

10/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HERNANDEZ, HECTOR ESQ.
Address: 2850 DOUGLAS ROAD, SUITE 400
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HERNANDEZ, HECTOR JR
Address: 7855 NW 12 STREET SUITE 105
City-St-Zip: MIAMI, FL 33126

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: HECTOR HERNANDEZ

MGRM

10/21/2009

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