

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000028523

FILED
Oct 25, 2009
Secretary of State

Entity Name: DIVERSIFIED FORMS LLC

Current Principal Place of Business:

5452 SW 127 AVENUE
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

5452 SW 127 AVENUE
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 61-1529996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEGRONI, PEDRO
5452 SW 127 AVENUE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

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: PEDRO NEGRONI

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NEGRONI, PEDRO
Address: 5452 SW 127 AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM () Delete
Name: NEGRONI, MARITERE
Address: 5452 SW 127 AVENUE
City-St-Zip: MIRAMAR, FL 33027

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: PEDRO NEGRONI

MR.

10/25/2009

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