2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 15, 2009
Secretary of State

DOCUMENT# L07000034802

Entity Name: UFTG, LLC

Current Principal Place of Business:

16500 COLLINS AVE, UNIT 751
SUNNY ISLES BEACH, FL 33016

New Principal Place of Business:

16500 COLLINS AVE, UNIT 751
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

16500 COLLINS AVE, UNIT 751
SUNNY ISLES BEACH, FL 33016

New Mailing Address:

16500 COLLINS AVE, UNIT 751
SUNNY ISLES BEACH, FL 33160

FEI Number: 13-4345351 **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:

MUNIAN, JEREMY
16500 COLLINS AVE, UNIT 751
SUNNY ISLES BEACH, FL 33016 US

Name and Address of New Registered Agent:

MUNIAN, JEREMY
16500 COLLINS AVE, UNIT 751
SUNNY ISLES BEACH, FL 33160 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: JEREMY MUNIAN 10/15/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MUNIAN, JEREMY
Address: 16500 COLLINS AVE, UNIT 751
City-St-Zip: SUNNY ISLES BEACH, FL 33016

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MUNIAN, JEREMY
Address: 16500 COLLINS AVE, UNIT 751
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: JEREMY MUNIAN MGRM 10/15/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date