

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000050673

FILED
Oct 31, 2008
Secretary of State

Entity Name: MEETING PLANNERS MIAMI, LLC

Current Principal Place of Business:

6770 INDIAN CREEK DRIVE
9P
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

6770 INDIAN CREEK DRIVE
9P
MIAMI BEACH, FL 33141 US

New Mailing Address:

FEI Number: 26-0161145 **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:

Name and Address of New Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
4001 WEST HENRY AVENUE
SUITE 306
TAMPA, FL 33614 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: INGRID GIL

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: GIL, INGRID
Address: 6770 INDIAN CREEK DRIVE 9P
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: GIL, REBECA
Address: 6770 INDIAN CREEK DRIVE 9P
City-St-Zip: MIAMI BEACH, FL 33141 US

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: INGRID GIL

MGRM

10/31/2008

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