

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000060146

**FILED**  
**Nov 16, 2010**  
**Secretary of State**

**Entity Name:** SCALATORE OF CORAL GABLES, LLC

**Current Principal Place of Business:**

360 SAN LORENZO AVENUE  
1505  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

360 SAN LORENZO AVENUE  
1505  
CORAL GABLES, FL 33146

**New Mailing Address:**

**FEI Number:** 26-0337845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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: NRAI

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BERGER, ALEXANDRE  
Address: 10220 S.W. 20TH STREET  
City-St-Zip: DAVIE, FL 33324

Title: MGRM  
Name: BERGER, ANA P  
Address: 10220 S.W. 20TH STREET  
City-St-Zip: DAVIE, FL 33324

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: ALEX BERGER

MGRM

11/16/2010

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