

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000064893

**FILED**  
**Jul 03, 2012**  
**Secretary of State**

**Entity Name:** CAPSTONE FUND I, LLC

**Current Principal Place of Business:**

5900 N. ANDREWS AVE  
SUITE 625  
FORT LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

515 E LAS OLAS BLVD  
SUITE 400  
FORT LAUDERDALE, FL 33301 US

**Current Mailing Address:**

5900 N. ANDREWS AVE  
SUITE 625  
FORT LAUDERDALE, FL 33309 US

**New Mailing Address:**

515 E LAS OLAS BLVD  
SUITE 400  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 26-0463044

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURAI WALD BIONDO MORENO & BROCHIN, P.A.  
TWO ALHAMBRA PLAZA  
PH 1B  
CORAL GABLES, FL 33134 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:** GERALD BIONDO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** CAPSTONE GROUP, LLC  
**Address:** 515 E LAS OLAS BLVD SUITE 400  
**City-St-Zip:** FORT LAUDERDALE, FL 33301 US

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:** AJ BELT III

MGRM

07/03/2012

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