

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000081803

Entity Name: G NETWORK 360, LLC

**FILED**  
**Oct 03, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

2332 GALIANO STREET  
# 227  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2332 GALIANO STREET  
# 227  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

2121 PONCE DE LEON BLVD.  
1050  
MIAMI, FL 33134

**New Mailing Address:**

2121 PONCE DE LEON BLVD.  
1050  
CORAL GABLES, FL 33134

FEI Number: 41-2248917      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:**

STEPHEN HEGEDUS ESQ. P.L.  
1051 COLLINS AVENUE  
SUITE 9  
MIAMI BEACH, FL 33139 US

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

CONSULTING SERVICES OF SOUTH FLORIDA  
2121 PONCE DE LEON BLVD.  
1050  
CORAL GABLES, FL 33134 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: ANTONIO GARCIA

10/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DEVOTO, ANDREA  
Address: 111 NW 24TH AVENUE  
City-St-Zip: MIAMI, FL 33125

**ADDITIONS/CHANGES:**

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: ANDREA DEVOTO

MGMR

10/03/2008

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