

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000092147

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** OSKAR ENTERPRISES LLC

**Current Principal Place of Business:**

4804 NW 79 AVE  
105  
MIAMI, FL 33166 DA

**New Principal Place of Business:**

**Current Mailing Address:**

4804 NW 79 AVE  
105  
MIAMI, FL 33166 DA

**New Mailing Address:**

**FEI Number:** 26-1155534      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MEDINA, OSCAR  
4804 NW 79 AVE  
105  
MIAMI, FL 33166 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:** OSKAR MEDINA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** MEDINA, OSCAR  
**Address:** 4804 NW 79 AVE APT105  
**City-St-Zip:** MIAMI, FL 33166 DA

**Title:** VP  
**Name:** BENEDEZ, LUZ S  
**Address:** 4804 NW 79 AVE APT 105  
**City-St-Zip:** MIAMI, FL 33166

**Title:** S  
**Name:** MEDINA, WILSON  
**Address:** 4804 NW 79 AVE  
**City-St-Zip:** MIAMI, FL 33166 DA

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:** OSKAR MEDINA

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01/12/2011

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