

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000096788

FILED  
May 25, 2009  
Secretary of State

Entity Name: MASTERFORCE FLORIDA, LLC

## Current Principal Place of Business:

3033 CORAL WAY  
MIAMI, FL 33145

## New Principal Place of Business:

1110 BRICKELL AVE .  
SUITE 430 K-8  
MIAMI, FL 33131

## Current Mailing Address:

3033 CORAL WAY  
MIAMI, FL 33145

## New Mailing Address:

789 CRANDON BLVD  
# 504  
KEY BISCAYNE, FL 33149

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TARRAU, GABRIEL  
3033 CORAL WAY  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

TARRAU, GABRIEL  
1110 BRICKELL AVE .  
SUITE 430 K-8  
MIAMI, FL 33131 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: GABRIEL TARRAU

05/25/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: TARRAU, GABRIEL  
Address: 3033 CORAL WAY  
City-St-Zip: MIAMI, FL 33145

Title: MGRM ( ) Delete  
Name: PENA, RUBEN  
Address: 3033 CORAL WAY  
City-St-Zip: MIAMI, FL 33145

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: TARRAU, GABRIEL  
Address: 1110 BRICKELL AVE . # 430 K-8  
City-St-Zip: MIAMI, FL 33131

Title: MGRM (X) Change ( ) Addition  
Name: PENA, RUBEN  
Address: 1110 BRICKELL AVE . # 430 K-8  
City-St-Zip: MIAMI, FL 33131

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: RUBEN PENA

MM

05/25/2009

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