

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000123798

FILED
Oct 16, 2009
Secretary of State

Entity Name: *****VENEDOM-MIAMI,LLC

Current Principal Place of Business:

10060 SW 4TH ST.
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

10060 SW 4TH ST.
MIAMI, FL 33174

New Mailing Address:

FEI Number: 51-0663034 **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:

Name and Address of New Registered Agent:

CRISOSTOMO, JOSE
10060 SW 4TH ST.
MIAMI, FL 33174 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: JOSE CRISOSTOMO

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CRISOSTOMO, JOSE
Address: 10060 SW 4TH ST.
City-St-Zip: MIAMI, FL 33174

Title: MGRM () Delete
Name: CANATE, YADIRA
Address: 10060 SW 4TH ST.
City-St-Zip: MIAMI, FL 33174

Title: MGRM () Delete
Name: CHRISOSTOMO, ELDER
Address: 10060 SW 4TH ST.
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSE CRISOSTOMO

MRG

10/16/2009

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