## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L08000020304

City-St-Zip:

MIAMI, FL 33180

Entity Name: VANGUARDIA FAMILY GROUP, LLC

FILED Nov 17, 2009 Secretary of State

Current Principal Place of Business:		New Principal	New Principal Place of Business:	
19901 E C0 #305	DUNTRY CLUB DR			
MIAMI, FL	33180			
Current Mailing Address:		New Mailing A	New Mailing Address:	
19901 E C0 #305 MIAMI, FL	DUNTRY CLUB DR 33180			
FEI Number: In accordance	26-2069738 FEI Number Applied For() e with s. 607.193(2)(b), F.S., the limited liability comp	•	r notice.	
Name and	Address of Current Registered Agent:	Name and Add	ress of New Registered Agent:	
SALAZAR, ARMANDO A 19901 E COUNTRY CLUB DR #305 MIAMI, FL 33180 US		19901 E COUN #305	SALAZAR, JORGE E 19901 E COUNTRY CLUB DR #305 MIAMI, FL 33180 US	
The above in the State	named entity submits this statement for the pur of Florida.	rpose of changing its reg	gistered office or registered agent, or both	
SIGNATURE: JORGE E SALAZAR			11/17/2009	
	Electronic Signature of Registered Agen	t	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANG	GES:	
Title: Name: Address: City-St-Zip:	MGRM (X) Delete SALAZAR, ARMANDO A 19901 E COUNTRY CLUB DR #305 MIAMI, FL 33180	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete SALAZAR, JORGE E 19901 E COUNTRY CLUB DR #305 MIAMI, FL 33180	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete SALAZAR, MARCELA 19901 E COUNTRY CLUB DR #305 MIAMI, FL 33180	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete SALAZAR, HUGO F 19901 E COUNTRY CLUB DR #305 MIAMI, FL 33180	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address:	MGRM () Delete DE SALAZAR, MELBA A 19901 E COUNTRY CLUB DR #305	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JORGE E SALAZAR MGRM 11/17/2009