

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000033315

Entity Name: MY GIFT AVENUE LLC

**FILED**  
**Sep 30, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

11701 LAKE VICTORIA GARDENS AVENUE  
SUITE 7106  
PALM BEACH GARDENS, FL 33410 US

## **New Principal Place of Business:**

11701 LAKE VICTORIA GARDENS AVENUE  
SUITE 7107  
PALM BEACH GARDENS, FL 33410 US

## **Current Mailing Address:**

11701 LAKE VICTORIA GARDENS AVENUE  
SUITE 7106  
PALM BEACH GARDENS, FL 33410 US

## **New Mailing Address:**

11701 LAKE VICTORIA GARDENS AVENUE  
SUITE 7107  
PALM BEACH GARDENS, FL 33410 US

FEI Number: 26-2314033

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAPIA, LUIS R  
11701 LAKE VICTORIA GARDENS AVENUE  
SUITE 7106  
PALM BEACH GARDENS, FL 33410 US

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

TAPIA, LUIS R  
11701 LAKE VICTORIA GARDENS AVENUE  
SUITE 7107  
PALM BEACH GARDENS, FL 33410 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: LUIS R.TAPIA

09/30/2010

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TAPIA, LUIS R  
Address: 11701 LAKE VICTORIA GARDENS AV.STE. 7107  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: MGRM  
Name: TAPIA, SARAH G  
Address: 11701 LAKE VICTORIA GARDENS AVE STE.7107  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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: LUIS R.TAPIA

MGR

09/30/2010

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