

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000037960

FILED  
Oct 21, 2009  
Secretary of State

**Entity Name:** MIAMI PROFESSIONAL BARTENDER ACADEMY, LLC

**Current Principal Place of Business:**

7190 HARBOR ISLAND DR  
902  
NORTH BAY VILLAGE, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

7190 HARBOR ISLAND DR  
902  
NORTH BAY VILLAGE, FL 33141

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

FERNANDEZ, SERGIO A  
7190 HARBOR ISLAND DR  
902  
NORTH BAY VILLAGE, FL 33141 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: SERGIO FERNANDEZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: FERNANDEZ, SERGIO A  
Address: 7190 HARBOR ISLAND DR 902  
City-St-Zip: NORTH BAY VILLAGE, FL 33141 US

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

Title: MGRM ( ) Delete  
Name: ARANA, ADNER E  
Address: 14740 SW 129 PLACE RD  
City-St-Zip: MIAMI, FL 33186 US

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: SERGIO FERNANDEZ

MR.

10/21/2009

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