

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000053064

FILED
Oct 09, 2009
Secretary of State

Entity Name: NESTOCOME, LLC

Current Principal Place of Business:

C/O LOUIS P. ARCHAMBAULT
2 SOUTH BISCAYNE BLVD., SUITE 2400
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

C/O LOUIS P. ARCHAMBAULT
2 SOUTH BISCAYNE BLVD., SUITE 2400
MIAMI, FL 33131

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ARCHAMBAULT, LOUIS P
ONE BISCAYNE TOWER
2 SOUTH BISCAYNE BLVD., SUITE 2400
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: ARCHAMBAULT, LOUIS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LARSSON, MICHAEL
Address: 2 SOUTH BISCAYNE BLVD., SUITE 2400
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

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: MICHAEL LARSSON

MGRM

10/09/2009

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