2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000066944

Entity Name: 173 ENTERTAINMENT, LLC

FILED Oct 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4572 NW 114TH AVENUE 5020 NW 173 ST

SUITE 1311 MIAMI, FL 33055 US DORAL, FL 33178 US

Current Mailing Address: New Mailing Address:

4572 NW 114TH AVENUE 5020 NW 173 ST

SUITE 1311 MIAMI, FL 33055 US DORAL, FL 33178 US

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

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:

MARIN, CARLOS R 4572 NW 114TH AVENUE 5020 NW 173 ST SUITE 1311 MIAMI, FL 33055 US DORAL, FL 33178 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.

ADDITIONS/CHANGES:

SIGNATURE: CARLOS R MARIN 10/21/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: CEO () Delete Title: CEO (X) Change () Addition Name: MARIN, CARLOS R MARIN, CARLOS R

 Address:
 4572 NW 114TH AVENUE, SUITE 1311
 Address:
 5020 NW 173 ST

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:
 MIAMI, FL 33055 US

Title: VP () Delete Title: VP (X) Change () Addition Name: REYES, FRANKLIN Name: MARIN, JANELY

 Address:
 4572 NW 114TH AVENUE, SUITE 1311
 Address:
 5020 NW 173 ST

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:
 MIAMI, FL 33055 US

Title: () Delete Title: MGR () Change (X) Addition

 Name:
 Name:
 ZERQUERA, RENE F

 Address:
 Address:
 PO BOX 126384

 City-St-Zip:
 City-St-Zip:
 HIALEAH, FL 33012 US

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 BONET, LAURA M

 Address:
 Address:
 5020 NW 173ST

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33055 US

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: RENE ZERQUERA MGR 10/21/2009