

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000076801

Entity Name: WEST PINE INVESTMENT LLC

FILED
Nov 12, 2009
Secretary of State

Current Principal Place of Business:

757 NW 27TH AVENUE
SUITE 204
MIAMI, FL 33125 US

Current Mailing Address:

757 NW 27TH AVENUE
SUITE 204
MIAMI, FL 33125 US

New Principal Place of Business:

814 PONCE DE LEON BLVD
SUITE 310
CORAL GABLES, FL 33134 US

New Mailing Address:

814 PONCE DE LEON BLVD
SUITE 310
CORAL GABLES, FL 33134 US

FEI Number: 26-4319965 FEI Number Applied For () FEI Number Not Applicable () 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:

AGUILAR, RICHARD
757 NW 27TH AVE
SUITE 204
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

AGUILAR, RICHARD
814 PONCE DE LEON BLVD
SUITE 310
CORAL GABLES, FL 33134 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: RICHARD AGUILAR

11/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AGUILAR, RICHARD
Address: 757 NW 27TH AVE, SUITE 204
City-St-Zip: MIAMI, FL 33125 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: AGUILAR, RICHARD
Address: 814 PONCE DE LEON BLVD, SUITE 310
City-St-Zip: CORAL GABLES, FL 33134 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: RICHARD AGUILAR

MGRM

11/12/2009

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