

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000079799

Entity Name: CAMINOONE, LLC

FILED  
Oct 14, 2009  
Secretary of State

**Current Principal Place of Business:**

1700 S. DIXIE HIGHWAY  
SUITE 506  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

1700 S. DIXIE HIGHWAY  
SUITE 506  
BOCA RATON, FL 33432 US

**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:**

PERLMAN, YEVOLI & ALBRIGHT, P.L.  
200 SOUTH ANDREWS AVE.  
SUITE 600  
FORT LAUDERDALE, FL 33301 US

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

RICE, LAUREEN D MRS.  
8 ROYAL PALM WAY  
UNIT 103  
BOCA RATON, FL 33432 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: LAUREEN D. RICE

10/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PINGREE, MICHAEL  
Address: 350 CAMINO GARDENS BLVD., SUITE 102  
City-St-Zip: BOCA RATON, FL 33432 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PINGREE, MICHAEL  
Address: 1700 S. DIXIE HIGHWAY, STE. 506  
City-St-Zip: BOCA RATON, FL 33432 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: MICHAEL PINGREE

MGRM

10/14/2009

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