

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000085724

Entity Name: BITCINIR, L.L.C.

**FILED**  
**Oct 29, 2013**  
**Secretary of State**

## **Current Principal Place of Business:**

1200 BRICKELL AVENUE  
SUITE 505  
MIAMI, FL 33131

## **New Principal Place of Business:**

255 ALHAMBRA CIRCLE  
414  
CORAL GABLES, FL 33134

## **Current Mailing Address:**

1200 BRICKELL AVENUE  
SUITE 505  
MIAMI, FL 33131

## **New Mailing Address:**

255 ALHAMBRA CIRCLE  
SUITE 414  
CORAL GABLES, FL 33134

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

MARRERO, JOSE  
1200 BRICKELL AVENUE  
SUITE 505  
MIAMI, FL 33131 US

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

BILCHIK, WARREN  
255 ALHAMBRA CIRCLE  
SUITE 414  
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: WARREN BILCHIK

10/29/2013

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BITCHATCHI DELGADO, INIRIDA  
Address: 255 ALHAMBRA CIRCLE, SUITE 414  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: ALMARZA BELLOSO, GUSTAVO R  
Address: 255 ALHAMBRA CIRCLE SUITE 414  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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: GUSTAVO ALMARZA BELLOSO

MGR

10/29/2013

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