

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000089894

Entity Name: CAPRI 514, LLC

FILED  
Nov 18, 2009  
Secretary of State

## Current Principal Place of Business:

10700 NW 66TH STREET #514  
DORAL, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

10700 NW 66TH STREET #514  
DORAL, FL 33178

## New Mailing Address:

11184 NW 73RD ST.  
DORAL, FL 33178

FEI Number: 30-0508794      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:

CABANAS, JOSEPH F  
CABANAS & ASSOCIATES  
10520 NW 26TH STREET, SUITE C201  
DORAL, FL 33172 US

## Name and Address of New Registered Agent:

CABANAS & ASSOCIATES, P.A.  
10520 NW 26TH ST.  
C201  
DORAL, FL 33172 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: JOSEPH F. CABANAS

11/18/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MICELLI, DANIEL  
Address: 10700 NW 66TH STREET #514  
City-St-Zip: DORAL, FL 33178

Title: MGRM ( ) Delete  
Name: MICELLI, MIGUEL  
Address: 10700 NW 66TH STREET #514  
City-St-Zip: DORAL, FL 33178

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MICELLI, DANIEL  
Address: 10700 NW 66TH STREET #514  
City-St-Zip: DORAL, FL 33178 US

Title: MGRM (X) Change ( ) Addition  
Name: MICELLI, MIGUEL  
Address: 10700 NW 66TH STREET #514  
City-St-Zip: DORAL, FL 33178 US

Title: MGRM ( ) Change (X) Addition  
Name: MICELLI, CARLOS A  
Address: 10700 NW 66 STREET - #514  
City-St-Zip: DORAL, FL 33178 US

Title: MGRM ( ) Change (X) Addition  
Name: ARIAS, MARIA P  
Address: 10700 NW 66 STREET - # 514  
City-St-Zip: DORAL, FL 33178 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: DANIEL MICELLI

MGRM

11/18/2009

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