

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000090420

**FILED**  
**Feb 02, 2010**  
**Secretary of State**

**Entity Name:** SOBE ASSOCIATED SERVICES LLC

**Current Principal Place of Business:**

9417 HARDING AVE.  
SURFSIDE, FL 33154

**New Principal Place of Business:**

1400 E GOLFVEIW DR  
PEMBROKE PINES, FL 33026

**Current Mailing Address:**

9417 HARDING AVE.  
SURFSIDE, FL 33154

**New Mailing Address:**

1400 EAST GOLFVIEW DR  
PEMBROKE PINES, FL 33026

**FEI Number:** 26-3407544      **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:**

MEJIA, OSWALDO  
1400 EAST GOLFVIEW DR  
PEMBROKE PINES, FL 33026      US

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

CABALLERO, JOE  
1400 EAST GOLFVIEW DR  
PEMBROKE PINES, FL 33026      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: JOE CABALLERO

02/02/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SEPULVEDA, JEFFERSON  
Address: 1400 EAST GOLVIEW DR  
City-St-Zip: PEMBROKE PINES, FL 33026

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: JEFFERSON SEPULVEDA

MR.

02/02/2010

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