2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 22, 2009
Secretary of State

DOCUMENT# L08000112490

Entity Name: DANZARTE, LLC

Current Principal Place of Business:

201 CRANDON BLVD.
SUITE 323
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

201 CRANDON BLVD.
SUITE 341
KEY BISCAYNE, FL 33149 US

Current Mailing Address:

201 CRANDON BLVD.
SUITE 323
KEY BISCAYNE, FL 33149 US

New Mailing Address:

201 CRANDON BLVD.
SUITE 341
KEY BISCAYNE, FL 33149 US

FEI Number: 26-3859817 **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:

HERRERA, JUAN M
201 CRANDON BLVD.
STE. 323
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

JUAN M. HERRERA
201 CRANDON BLVD.
SUITE 341
KEY BISCAYNE, FL 33149 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: JUAN M. HERRERA 10/22/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HERRERA, JUAN M
Address: 201 CRANDON BLVD., STE. 323
City-St-Zip: KEY BISCAYNE, FL 33149 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HERRERA, JUAN M
Address: 201 CRANDON BLVD., STE. 341
City-St-Zip: KEY BISCAYNE, FL 33149 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: JUAN M. HERRERA MGRM 10/22/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date