

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000002356

**FILED**  
**Dec 02, 2011**  
**Secretary of State**

**Entity Name:** OPTIMA FIXED INCOME, LLC

**Current Principal Place of Business:**

200 S. BISCAYNE BLVD., STE. 3660  
MIAMI, FL 33131

**New Principal Place of Business:**

200 S. BISCAYNE BLVD  
SUITE 3580  
MIAMI, FL 33131

**Current Mailing Address:**

200 S. BISCAYNE BLVD., STE. 3660  
MIAMI, FL 33131

**New Mailing Address:**

200 S. BISCAYNE BLVD  
SUITE 3580  
MIAMI, FL 33131

**FEI Number:** 32-0271174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

POWELL, ROBERT  
200 S. BISCAYNE BLVD., STE. 3660  
MIAMI, FL 33131 US

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

POWELL, ROBERT  
200 S. BISCAYNE BLVD  
SUITE 3580  
MIAMI, FL 33131 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: ROBERT POWELL

12/02/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRP  
Name: KORF, MORDECHAI  
Address: 200 S. BISCAYNE BLVD., STE. 3580  
City-St-Zip: MIAMI, FL 33131

Title: MGRS  
Name: LABER, URIEL  
Address: 200 S. BISCAYNE BLVD., STE. 3580  
City-St-Zip: MIAMI, FL 33131

Title: MGRT  
Name: LOZYNSKYY, VOLODYMYR  
Address: 200 S. BISCAYNE BLVD., STE. 3580  
City-St-Zip: MIAMI, FL 33131

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: MORDECHAI KORF

MGRP

12/02/2011

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