

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000011003

**FILED**  
**Oct 22, 2009**  
**Secretary of State**

**Entity Name:** CAPRY INVESTMENTS, LLC

**Current Principal Place of Business:**

1171 JASON WAY  
WEST PALM BEACH, FL 33406

**New Principal Place of Business:**

**Current Mailing Address:**

1171 JASON WAY  
WEST PALM BEACH, FL 33406

**New Mailing Address:**

**FEI Number:** 80-0304255

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OSORIO, CARLOS H  
1171 JASON WAY  
WEST PALM BEACH, FL 33406 US

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

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:** CARLOS H. OSORIO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** OSORIO, CARLOS H  
**Address:** 1171 JASON WAY  
**City-St-Zip:** WEST PALM BEACH, FL 33406

**Title:** MGRM ( ) Delete  
**Name:** YEPES, CATALINA  
**Address:** 1171 JASON WAY  
**City-St-Zip:** WEST PALM BEACH, FL 33406

**Title:** MGRM ( ) Delete  
**Name:** PIRAQUIVE, WALTER  
**Address:** 1171 JASON WAY  
**City-St-Zip:** WEST PALM BEACH, FL 33406

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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:** CARLOS H. OSORIO

MGR

10/22/2009

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