

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000019018

**Entity Name:** MIGDAL CAPITAL GROUP LLC

**FILED**  
**Nov 10, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

3363 NE 163RD STREET  
SUITE 801  
MIAMI, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

3363 NE 163RD STREET  
SUITE 801  
MIAMI, FL 33160 US

**New Mailing Address:**

**FEI Number:** 80-0434904

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSITA, COHEN  
3363 NE 163RD STREET  
SUITE 801  
MIAMI, FL 33160 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:** ROSITA COHEN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** COHEN, ROSITA  
**Address:** 3363 NE 163RD STREET SUITE 801  
**City-St-Zip:** MIAMI, FL 33160 US

**Title:** VP  
**Name:** COHEN, TAMARA  
**Address:** 3363 NE 163RD STREET SUITE 801  
**City-St-Zip:** MIAMI, FL 33160 US

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:** ROSITA COHEN

MM

11/10/2013

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