

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000026452

FILED
Nov 30, 2012
Secretary of State

Entity Name: ACMA 10815 LLC

Current Principal Place of Business:

420 SW 19 ROAD
MIAMI, FL 33129

New Principal Place of Business:

7400 NW 7TH ST
OFFICE # 204
MIAMI, FL 33126

Current Mailing Address:

420 SW 19 ROAD
MIAMI, FL 33129

New Mailing Address:

7400 NW 7TH ST
OFFICE # 204
MIAMI, FL 33126

FEI Number: 26-4496027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HERRERA, IGNACIO
420 SW 19 ROAD
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

GONCALVES FRADE, ANTONIO
5825 COLLINS AVE
UNIT 5F
MIAMI BEACH, FL 33126 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: ANTONIO GONCALVES FRADE

11/30/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GONCALVES FRADE, ANTONIO
Address: 5825 COLLINS AVE UNIT 5F
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM
Name: DASILVA DE GONCALVES, CELIA M
Address: 5825 COLLINS AVE UNIT 5F
City-St-Zip: MIAMI BEACH, FL 33140 UN

Title: MGRM
Name: GONCALVES, ANA C
Address: 5825 COLLINS AVE., UNIT 5F
City-St-Zip: MIAMI BEACH, FL 33140 UN

Title: MGRM
Name: GONCALVES, MIGUEL
Address: 5825 COLLINS AVE., UNIT 5F
City-St-Zip: MIAMI BEACH, FL 33140 UN

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: ANTONIO GONCALVES FRADE

MGMR

11/30/2012

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