

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000044957

**FILED**  
**Jun 14, 2011**  
**Secretary of State**

**Entity Name:** COASTWIDE SERVICES, LLC

**Current Principal Place of Business:**

1840 S.W. 22ND STREET, 4TH FLOOR  
MIAMI, FL 33145

**New Principal Place of Business:**

5711 HANCOCK ROAD  
SOUTH WEST RANCHES, FL 33330

**Current Mailing Address:**

1840 S.W. 22ND STREET, 4TH FLOOR  
MIAMI, FL 33145

**New Mailing Address:**

5711 HANCOCK ROAD  
SOUTH WEST RANCHES, FL 33330

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: NATALIA UTRERA AS VP FOR SPIEGEL & UTRERA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: OM  
Name: MUSA, ASHRAF F  
Address: 5711 HANCOCK ROAD  
City-St-Zip: SOUTH WEST RANCHES, FL 33330

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: ASHRAF F. MUSA

OM

06/14/2011

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