2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000052304

Entity Name: PAB REALTY, LLC

FILED Mar 08, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5301 BLUE LAGOON DRIVE 5301 BLUE LAGOON DRIVE 200

MIAMI, FL 33126 MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

5301 BLUE LAGOON DRIVE 5301 BLUE LAGOON DRIVE 200

MIAMI, FL 33126 MIAMI, FL 33126 US

FEI Number: 27-2073953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MURAI WALD BIONDO & MORENO, P.A. BAITER, JAMES

TWO ALHAMBRA PLAZA 5301 BLUE LAGOON DRIVE

PENTHOUSE 1B 200 CORAL GABLES, FL 33134 US MIAMI, 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: JAMES BAITER 03/08/2011

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ELLERT, KENT Name:

Address: 5301 BLUE LAGOON DRIVE

City-St-Zip: MIAMI, FL 33126

Title: MR

Name: BAITER, JAMES

Address: 5301 BLUE LAGOON DRIVE

City-St-Zip: MIAMI, FL 33126

Title: MR

ORAN, STUART Name:

5301 BLUE LAGOON DRIVE Address:

City-St-Zip: MIAMI, FL 33126

Title: MR

Name: VAN SLYKE, BRIAN 5301 BLUE LAGOON DRIVE Address:

City-St-Zip: MIAMI, FL 33126

Title: MR

ALVAREZ, JORGE Name:

5301 BLUE LAGOON DRIVE Address:

City-St-Zip: MIAMI, FL 33126

Title:

CARTER, SAM Name:

Address: 5301 BLUE LAGOON DRIVE

MIAMI, FL 33126 City-St-Zip:

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 Statues.

SIGNATURE: JAMES BAITER **MGRM** 03/08/2011

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