

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000059654

Entity Name: SETOB, LLC

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

C/O 2605 PONCE DE LEON BOULEVARD  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 2605 PONCE DE LEON BOULEVARD  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

TRESCOTT, DRUCKER & SCHOEN, P.L.  
2605 PONCE DE LEON BOULEVARD  
CORAL GABLES, FL 33134 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: TRESCOTT DRUCKER & SCHOEN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR

Name: ABRAHAMS, ERIC J

Address: C/O 2605 PONCE DE LEON BOULEVARD

City-St-Zip: CORAL GABLES, FL 33134

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: JASON ABRAHAMS

MGR

04/24/2012

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