

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000074442

FILED  
Apr 27, 2011  
Secretary of State

Entity Name: RECONQUISTA HOMESTEAD INVESTMENT LLC

## Current Principal Place of Business:

2655 LEJEUNE ROAD  
SUITE 508  
CORAL GABLES, FL 33134

## New Principal Place of Business:

1221 BRICKELL AVENUE  
SUITE 1590  
MIAMI, FL 33131

## Current Mailing Address:

2655 LEJEUNE ROAD  
SUITE 508  
CORAL GABLES, FL 33134

## New Mailing Address:

1221 BRICKELL AVENUE  
SUITE 1590  
MIAMI, FL 33131

FEI Number: 27-0857243

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PENALVER, AURORA ESQ.  
2655 LE JEUNE ROAD  
STE 508  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

ARMANDO, MAURICIO MR  
1221 BRICKELL AVENUE  
SUITE 1590  
MIAMI, FL 33131 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: MAURICIO ARMANDO

04/27/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: ARMANDO, SANTIAGO B  
Address: 1221 BRICKELL AVENUE, SUITE 1590  
City-St-Zip: MIAMI, FL 33131

Title: MGRM  
Name: COLLINO, MIRIAM  
Address: 1221 BRICKELL AVENUE, SUITE 1590  
City-St-Zip: MIAMI, FL 33131

Title: MGRM  
Name: ARMANDO, SEBASTIAN  
Address: 1221 BRICKELL AVENUE, SUITE 1590  
City-St-Zip: MIAMI, FL 33131

Title: MGR  
Name: ARMANDO, MAURICIO  
Address: 1221 BRICKELL AVENUE, SUITE 1590  
City-St-Zip: MIAMI, FL 33131

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: MAURICIO ARMANDO

MGR

04/27/2011

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