

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000094565

**FILED**  
**Sep 29, 2010**  
**Secretary of State**

**Entity Name:** SECURITY OCCUPATIONAL SUPPLIER LLC

**Current Principal Place of Business:**

9100 S DADELAND BLVD  
STE 912  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

9100 S DADELAND BLVD  
STE 912  
MIAMI, FL 33156

**New Mailing Address:**

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

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

PIEDRA, AURELIO A  
9100 S DADELAND BLVD  
STE 912  
MIAMI, FL 33156 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: AURELIO A PIEDRA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BONVICINI, FABRIZIO  
Address: 9100 S DADELAND BLVD STE 912  
City-St-Zip: MIAMI, FL 33156

Title: MGR  
Name: SANCHEZ, NORIS  
Address: 9100 S DADELAND BLVD STE 912  
City-St-Zip: MIAMI, FL 33156

Title: MGR  
Name: VARELA, NABILA  
Address: 9100 S DADELAND BLVD STE 912  
City-St-Zip: MIAMI, FL 33156

Title: MGRM  
Name: BONVICINI JR, FABRIZIO  
Address: 9100 S DADELAND BLVD 912  
City-St-Zip: MIAMI, FL 33156

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: FABRIZIO BONVICINI

MGRM

09/29/2010

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