

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000045951

**FILED**  
**Oct 09, 2013**  
**Secretary of State**

**Entity Name:** REALITY INTEGRIDAD EMPRESARIAL S.A/INTEMPRE, S.A. L.L.C.

**Current Principal Place of Business:**

1103 NW 25TH AVENUE  
CAPE CORAL, FL 33993

**New Principal Place of Business:**

2002 DEL PRADO BLVD. S.  
201  
CAPE CORAL, FL 33990 US

**Current Mailing Address:**

1103 NW 25TH AVENUE  
CAPE CORAL, FL 33993

**New Mailing Address:**

2002 DEL PRADO BLVD. S.  
201  
CAPE CORAL, FL 33990 US

**FEI Number:** 80-0590192

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONZALEZ, CARLOS ALBERTO  
1103 NW 25TH AVENUE  
CAPE CORAL, FL 33993 US

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

GONZALEZ, CARLOS ALBERTO  
2002 DEL PRADO BLVD. S.  
201  
CAPE CORAL, FL 33990 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:** CARLOS ALBERTO GONZALEZ

10/09/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** P  
**Name:** GONZALEZ, CARLOS  
**Address:** 2002 DEL PRADO BLVD. S. #9  
**City-St-Zip:** CAPE CORAL, FL 33990 US

**Title:** VP  
**Name:** GUEVARA, LUPE  
**Address:** 2002 DEL PRADO BLVD. S. #9  
**City-St-Zip:** CAPE CORAL, FL 33990

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:** CARLOS ALBERO GONZALEZ

P

10/09/2013

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