

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000089555

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** UNIT 4402 CITY PLACE CONDO, LLC

**Current Principal Place of Business:**

901 PONCE DE LEON BLVD, SUITE 603  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

901 PONCE DE LEON BLVD, SUITE 603  
CORAL GABLES, FL 33134

**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:**

ALBORNOZ, WILLIAM H  
901 PONCE DE LEON BLVD, SUITE 603  
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: WILLIAM H. ALBORNOZ, ESQ.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GEREZ, OSCAR ROBERTO  
Address: 901 PONCE DE LEON BLVD, SUITE 603  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR  
Name: DE LA PLAZA, SILVINA  
Address: 901 PONCE DE LEON BLVD, SUITE 603  
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: OSCAR ROBERTO GEREZ

MGR

04/12/2012

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