

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000132346

**FILED**  
**Oct 11, 2011**  
**Secretary of State**

**Entity Name:** FOOD & BEVERAGE INVESTMENT GROUP 18298, LLC

**Current Principal Place of Business:**

150 ALHAMBRA CIRCLE  
SUITE 1270  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

159 HIATUS RD.  
UNIT 310  
PEMBROKE PINES, FL 33026 US

**Current Mailing Address:**

150 ALHAMBRA CIRCLE  
SUITE 1270  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

2030 S. DOUGLAS RD.  
SUITE 109  
CORAL GABLES, FL 33134 US

**FEI Number:** 27-4492672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMES P. GAGEL, P.A.  
150 ALHAMBRA CIRCLE  
SUITE 1270  
CORAL GABLES, FL 33134 US

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

JAMES GAGEL, ESQ.  
2030 S. DOUGLAS RD.  
SUITE 109  
CORAL GABLES, FL 33134 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: JAMES GAGEL

10/11/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ALIMENTOS 18298, C.A.  
Address: AV. JOVITA VILLALBA, CENTRO AUTOMOTRIZ PLA  
City-St-Zip: PAMPATAR - MARGARITA ISLAND, NE 11111 VE

Title: MGR  
Name: RIVERA, CARLOS  
Address: 2030 S. DOUGLAS RD., SUITE 109  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR  
Name: SCHOLTZ, ALEJANDRO  
Address: 2030 S. DOUGLAS RD., SUITE 109  
City-St-Zip: CORAL GABLES, FL 33134 US

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 RIVERA

MGR

10/11/2011

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