

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000100922

Entity Name: ORIOL LLC

**FILED**  
**Feb 04, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

7544 W MCNAB ROAD  
SUITE 5  
NORTH LAUDERDALE, FL 33068

**New Principal Place of Business:**

6269 NW 17TH STREET  
MARGATE, FL 33063

**Current Mailing Address:**

7544 W MCNAB ROAD  
SUITE 5  
NORTH LAUDERDALE, FL 33068

**New Mailing Address:**

6269 NW 17TH STREET  
MARGATE, FL 33063

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

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

ORIOL, EMMANUEL  
7544 WEST MCNAB ROAD  
SUITE 5  
NORTH LAUDERDALE, FL FL US

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

ORIOL, EMMANUEL  
6269 NW 17TH STREET  
MARGATE, FL FL 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: ORIOL EMMANUEL

02/04/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ORIOL, EMMANUEL  
Address: 6269 NW 17TH STREET  
City-St-Zip: MARGATE, FL 33063

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: ORIOL EMMANUEL

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02/04/2013

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