

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000120265

**FILED**  
**Jan 15, 2013**  
**Secretary of State**

**Entity Name:** LARISA INVESTMENTS, LLC.

**Current Principal Place of Business:**

1300 PONCE DE LEON BLVD  
APT 1008  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

1607 PONCE DE LEON BLVD.  
#10F  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1300 PONCE DE LEON BLVD  
APT 1008  
CORAL GABLES, FL 33134

**New Mailing Address:**

1607 PONCE DE LEON BLVD.  
#10F  
CORAL GABLES, FL 33134

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

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

ISAAC LARA, ADRIANA C  
1300 PONCE DE LEON BLVD  
APT 1008  
CORAL GABLES, FL 33134 US

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

ISAAC LARA, ADRIANA C  
1607 PONCE DE LEON BLVD.  
#10F  
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: ADRIANA ISAAC

01/15/2013

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ISAAC ZUBILLAGA, VICTOR MANUEL  
Address: 1607 PONCE DE LEON BLVD #10F  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR  
Name: LARA DE ISAAC, REBECA CECILIA  
Address: 1607 PONCE DE LEON BLVD. #10F  
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: VICTOR ISAAC

MGR

01/15/2013

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