

# 2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000122325

**FILED**  
**Apr 23, 2014**  
**Secretary of State**

**Entity Name:** NAUTICA RESOURCE MANAGEMENT LLC

**Current Principal Place of Business:**

3001 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

2990 PONCE DE LEON BLVD.  
SUITE 500  
CORAL GABLES, FL 33134

**Current Mailing Address:**

3001 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134

**New Mailing Address:**

2990 PONCE DE LEON BLVD.  
SUITE 500  
CORAL GABLES, FL 33134

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

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

MAS, JUAN C  
3001 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134 US

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

MAS, JUAN C  
2990 PONCE DE LEON BLVD.  
SUITE 500  
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: JUAN C. MAS

04/23/2014

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

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: MAS, JUAN CARLOS  
Address: 2990 PONCE DE LEON BLVD., SUITE 500  
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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: JUAN C. MAS

MGR

04/23/2014

\_\_\_\_\_  
Electronic Signature of Authorized Person

\_\_\_\_\_  
Date