

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000042283

**Entity Name:** LE SOLEIL MIAMI LLC

**FILED**  
**Oct 01, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

2036 ALTA MEADOWS LANE  
APT. # 1407  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

2036 ALTA MEADOWS LANE  
APT. # 1407  
DELRAY BEACH, FL 33444

**New Mailing Address:**

**FEI Number:** 80-0820148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GILABERT, SILVIA  
2036 ALTA MEADOWS LANE  
APT. # 1407  
DELRAY BEACH, FL 33444 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:** SILVIA GILABERT

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** GILABERT, SILVIA  
**Address:** 2036 ALTA MEADOWS LANE APT. # 1407  
**City-St-Zip:** DELRAY BEACH, FL 33444

**Title:** MGRM  
**Name:** ANDONIAN, MARY  
**Address:** 950 EGRET CIRCLE APT # 5410  
**City-St-Zip:** DELRAY BEACH, FL 33444

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:** SILVIA GILABERT

OWNE

10/01/2013

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