

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000155960

**Entity Name:** SESTO POTERE ONE, LLC

**FILED**  
**Mar 25, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

10632 WOODS CIRCLE  
#3  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 110294  
NAPLES, FL 34108

**New Mailing Address:**

P. O. BOX 110294  
NAPLES, FL 34108 US

**FEI Number:** 46-1728204

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEDOMINICIS, AUGUSTO  
10632 WOODS CIRCLE  
#3  
BONITA SPRINGS, FL 34135 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: AUGUSTO DEDOMINICIS

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: DEDOMINICIS, AUGUSTO  
Address: 10632 WOODS CIRCLE, #3  
City-St-Zip: BONITA SPRINGS, FL 34135 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: AUGUSTO DEDOMINICIS

MGR

03/25/2014

Electronic Signature of Authorized Person

Date