

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 27 PM 11:02

rf

DOCUMENT # L 99 000 000 202

1. Limited Liability Company's Name

PLAZA DE ESPAÑA GOURMET FOODS

2. Principal Office Address

100 KINGS POINT DR

Suite, Apt. #, etc.

1004

City & State

N. MIAMI BEACH, FL

Zip

33160

Country

USA

3. Mailing Office Address

- SAME -

Suite, Apt. #, etc.

City & State

REINSTATEMENT 2000

4. State/Country of Formation

FL

5. Date Organized or Qualified
To Do Business in Florida

01-13-1999

6. FEI Number

65-0886119

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

JESUS MEJIAS

Name

100 KINGS POINT DR #1004

Street Address (P.O. Box Number is Not Acceptable)

300003459313-4

11/09/00-01096-009

****150.00 ****150.00

Suite, Apt. #, Etc.

N. MIAMI BEACH

City

State

FL

Zip Code

33160

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

J. Mejias

Date 10-12-00

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
PRESIDENT	SERAFINA ATALAYA	100 KINGS POINT DR #1004	N. MIAMI BEACH, FL 33160
UP	JESUS MEJIAS BEGINES	100 KINGS POINT DR #1004	N. MIAMI BEACH, FL 33160
TREASURER	JESUS MEJIAS ATALAYA	100 KINGS POINT DR #1004	N. MIAMI BEACH, FL 33160
SECRETARY	ROCIO MONTOYA	100 KINGS POINT DR #1004	N. MIAMI BEACH, FL 33160

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

J. Mejias

Date 10-12-00

Daytime Phone# 305 9565001

Typed or printed name of signing Managing Member/Manager

JESUS MEJIAS

CR2E041 (9/00)