

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



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

FILED  
00 DEC 13 PM 12:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 2000

DOCUMENT #

L99-8494

1. Limited Liability Company's Name

PALIMAR USA LLC

2. Principal Office Address

1510 NW 128 Dr.  
Suite, Apt. #, etc.

3. Mailing Office Address

1510 NW 128 Dr.  
Suite, Apt. #, etc.

City & State

Sunrise, FL  
Zip Country

City & State

Sunrise, FL  
Zip Country

4. State/Country of Formation

5. Date Organized or Qualified  
To Do Business in Florida

6. FEI Number

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

Name

Spiegel & Utrera, P.A.

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

343 Almeria Ave.

Suite, Apt. #, Etc.

City

Coral Gables

State

FL

Zip Code

33134

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

*Jaume J. Spigel*  
REGISTERED AGENT MUST SIGN

Date 12/11/00

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
OPERATING MANAGER	PABLO CAicedo	same as the mailing address	
VICE OPERATING MANAGER	Liliana Montagut	same as the mailing address	

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

PABLO CAicedo

Date 12/11/00

Daytime Phone # (954) 858-1409

Typed or printed name of signing Managing Member/Manager