

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M06000001937

**FILED**  
**Oct 20, 2009**  
**Secretary of State**

**Entity Name:** DANE INVESTMENTS LLC

**Current Principal Place of Business:**

1221 BRICKELL AVENUE, STE 2660  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

1221 BRICKELL AVENUE, STE 2660  
MIAMI, FL 33131

**New Mailing Address:**

**FEI Number:** 20-4506906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NICHOLS, ANNE  
1221 BRICKELL AVENUE, STE 2660  
MIAMI, FL 33131 US

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

DAGROSA, JOSEPH JR.  
1221 BRICKELL AVENUE, STE 2660  
MIAMI, FL 33131 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: JOSEPH DAGROSA

10/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NEITHARDT, DAVID  
Address: 1221 BRICKELL AVENUE, STE 2660  
City-St-Zip: MIAMI, FL 33131

Title: MGRM ( ) Delete  
Name: DAGROSA, JOSEPH JR.  
Address: 1221 BRICKELL AVENUE, STE 2660  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JOSEPH DAGROSA

MGRM

10/20/2009

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