

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M07000007183

Entity Name: 1538 N. VISTA, LLC

FILED
Jun 24, 2009
Secretary of State

Current Principal Place of Business:

8491 WEST SUNSET BLVD., STE. 497
WEST HOLLYWOOD, FL 90069

New Principal Place of Business:

3400 CORAL WAY
PENTHOUSE
CORAL GABLES, FL 33145

Current Mailing Address:

8491 WEST SUNSET BLVD., STE. 497
WEST HOLLYWOOD, FL 90069

New Mailing Address:

3400 CORAL WAY
PENTHOUSE
CORAL GABLES, FL 33145

FEI Number: 95-4850007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

MILLENNIUM HOLDINGS, INC.
3400 CORAL WAY
PENTHOUSE
CORAL GABLES, FL 33145 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: JEFF GREENE

06/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GREENE, JEFF
Address: 8491 WEST SUNSET BLVD., STE. 497
City-St-Zip: WEST HOLLYWOOD, FL 90069

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GREENE, JEFF
Address: 3400 CORAL WAY
City-St-Zip: CORAL GABLES, FL 33145

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: JEFF GREENE

MGR

06/24/2009

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