

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M08000002876

FILED
Dec 01, 2009
Secretary of State

Entity Name: HRESSINGARSKALINN EHF, LLC

Current Principal Place of Business:

AUSTURSTRAETI 20
101 REYKJAVIK,

New Principal Place of Business:

AUSTURSTRAETI 20
101 REYKJAVIK, IC 101 ICELA

Current Mailing Address:

AUSTURSTRAETI 20
101 REYKJAVIK,

New Mailing Address:

AUSTURSTRAETI 20
101 REYKJAVIK, IC 101 ICELA

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMONS, BARRY L ESQ.
9100 SOUTH DADELAND BLVD.
SUITE 400
MIAMI, FL 33156 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: BARRY L SIMONS ESQ.

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MOINICHEN, EINAR STURLA
Address: BRAGAGOTU 34
City-St-Zip: 101 REYKJAVIK,

Title: MGR () Delete
Name: HILMARSSON, VALDIMAR
Address: GRANDAVEGI 7
City-St-Zip: 101 REYKJAVIK,

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MOINICHEN, EINAR STURLA
Address: BRAGAGOTU 34
City-St-Zip: 101 REYKJAVIK, IC ICELAND

Title: MGR (X) Change () Addition
Name: HILMARSSON, VALDIMAR
Address: GRANDAVEGI 7
City-St-Zip: 101 REYKJAVIK, IC ICELAND

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: EINAR STURLA MOINICHEN

MGR

12/01/2009

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