

**2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Jan 05, 2011  
Secretary of State**

DOCUMENT# M09000002142

**Entity Name:** GAMLA-CEDRON ARBORS, LLC

**Current Principal Place of Business:**

2875 N.E. 191ST STREET, SUITE 801  
AVENTURA, FL 33179

**New Principal Place of Business:**

2875 N.E. 191ST STREET, SUITE 200  
AVENTURA, FL 33179

**Current Mailing Address:**

2875 N.E. 191ST STREET, SUITE 801  
AVENTURA, FL 33179

**New Mailing Address:**

FEI Number: 30-0564947      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301      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: MICHELE HOLDEN, ASSISTANT SECRETARY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GAMLA FLORIDA LLC  
Address: 747 THIRD AVENUE, 4TH FLOOR  
City-St-Zip: NEW YORK, NY 100172803

Title: MGRM  
Name: CEDRON FLORIDA LLC  
Address: IM ZELTENGUT 4, CH-8700  
City-St-Zip: KUESNACHT, SWITZERLAND, XX

I hereby 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: SHAOUL MISHAL

PRES

01/05/2011

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