

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P97000006739

**Entity Name:** FACTORIA CLIP U.S.A., INC.

**FILED**  
**Dec 10, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5701 BISCAYNE BLVD.  
702  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

5701 BISCAYNE BLVD.  
702  
MIAMI, FL 33137

**New Mailing Address:**

**FEI Number:** 65-0728728

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MARRERO, JUAN  
5701 BISCAYNE BLVD.  
MIAMI, FL 33137 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: JUAN MARRERO

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARRERO, JUAN  
Address: 5701 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JUAN MARRERO

PRES

12/10/2010

Electronic Signature of Signing Officer or Director

Date