

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000095800

Entity Name: ALAMANDA CORP.

**FILED**  
**Aug 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

155 NW 20TH CT  
MIAMI, FL 33127 US

**New Principal Place of Business:**

155 NW 20TH ST  
MIAMI, FL 33127 US

**Current Mailing Address:**

155 NW 20TH CT  
MIAMI, FL 33127 US

**New Mailing Address:**

155 NW 20TH ST  
MIAMI, FL 33127 US

FEI Number: 65-0908580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ARRECHEA, FABIO D  
155 NW 20TH CT  
MIAMI, FL 33127 US

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

ARRECHEA, FABIO D  
155 NW 20TH ST  
MIAMI, FL 33127 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: FABIO ARRECHEA

08/01/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ARRECHEA, FABIO D  
Address: 155 NW 20TH ST  
City-St-Zip: MIAMI, FL 33127 US

Title: T  
Name: ARRECHEA, DOMINGO  
Address: 155 NW 20TH ST  
City-St-Zip: MIAMI, FL 33127 US

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: FABIO ARRECHEA

PD

08/01/2011

Electronic Signature of Signing Officer or Director

Date