

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000109869

**FILED**  
**Apr 11, 2013**  
**Secretary of State**

**Entity Name:** 405 SOUTH PINE ISLAND RD LLC

**Current Principal Place of Business:**

8551 W SUNRISE BLVD #105  
PLANTATION, FL 33322 US

**New Principal Place of Business:**

**Current Mailing Address:**

8551 W SUNRISE BLVD #105  
PLANTATION, FL 33322 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

QUILICHINI, SANDRA  
8551 W SUNRISE BLVD #105  
PLANTATION, FL 33322 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: SANDRA QUILICHINI

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: QUILICHINI, SANDRA  
Address: 8551 W SUNRISE BLVD #105  
City-St-Zip: PLANTATION, FL 33322 US

Title: MGMR  
Name: ALEXANDRE, QUILICHINI  
Address: 10923 NW 18 PLACE  
City-St-Zip: PLANTATION, FL 33322 UN

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: SANDRA QULICHINI

MGMR

04/11/2013

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