

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000112008

**Entity Name:** F.N., LLC

**Current Principal Place of Business:**

4457 NW 93 DORAL CT.  
MIAMI, FL 33178

**Current Mailing Address:**

4457 NW 93 DORAL CT.  
MIAMI, FL 33178

**FEI Number:** 20-8067393

**Certificate of Status Desired:** No

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

FERNANDEZ, ALFONSO  
4457 NW 93 DORAL CT.  
MIAMI, FL 33178 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:** ALFONSO FERNANDEZ

11/01/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FERNANDEZ, ALFONSO  
Address 4457 NW 93 DORAL CT.  
City-State-Zip: MIAMI FL 33178

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALFONSO FERNANDEZ

PRESIDENT

11/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date