



FLORIDA DEPARTMENT OF STATE Jim Smith...

Secretary of State
DIVISION OF CORPORATIONS

1. DOCUMENT # L01000009957

Name and Mailing Address

FILED

02 DEC 10 AM 8:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

0000895 01 FP 0.352 **PRSRT T3 0 0615 32818-679299 Influddialanffulationaldanidation TRAE COMMUNICATIONS, LLC 7226 WEST COLONIAL DRIVE, SUITE 218 ORLANDO FL 32818-6792



2. New Mailing Address				4. State/Country of Formation		
SA	ME			FL.	•	•
City, State,	Zip -				nized or Qualified — ness in Florida	06/14/2001
Principal Place of Business 3. New Principal Place of Business					Applied For	
7226 WEST COLONIAL DRIVE, SUITE 218 ORLANDO FL 32818 City, State,					59-3712889 Not App	
		City, State, Zip		7. CERTIFICATE OF STATUS DESIRED 55.00 Additional Fee required for a Certificate of Status		
	8. Name and Address of Current	Registered Agent		9. Name and	Address of New Registered	Agent
2736	DENS, TRACI 6 SILKWOOD CIRCLE #813 LANDO FL 32818		Street (ddress (P.C. box Number is Not Acceptable) City			
					FL	- 210 0000
Signature of Registered /	Agent Vac Gro	GISTERED AGENT MUST SIGN		,	Date	
11. Names	s and Street Addresses of Each Managing	Member/Manager				<u></u>
Title(s)	Name of Managing Members/Managers		Street Address of Each Managing Member/Manager		City / State / Zip	
10	Traci Giddens	2736 Sil	kwood C	ir. #813	Orlando, FL	-32818
		, ,	20	1337PP	TEIIOP	
			91	18/05	<u>72110P:</u> 9077 0: 50.0	77 10
				P. 510.4		
filing th all fees	that I am managing member/manager or is reinstatement application the reason for owed by the limited liability company have ade under oath.	dissolution has been eliminated, the	limited liability comp d on this application	pany name satisfic is true and accur	es the requirements of section ate, and my signature shall ha	608,406, F.S., and that
ignature of Ianaging M	Member/Manager Wacu	Gidden) Date 10	30_0	aytime Phone #_3}\	168.4538