

Reinstatement

1/30/2003-90041-005-\$50.00-\$50.00 *
9/18/2003-90001-004-\$50.00-\$50.00

DOCUMENT # **L02000029852**

1. Entity Name
IOXUS LAND HOLDING COMPANY, LLC



04 MAY 18 AM 10:31

FLORIDA STATE
TALLAHASSEE FLORIDA

MJH

Principal Place of Business Mailing Address
201 S. BISCAYNE BLVD., 28TH FL **201 S. BISCAYNE BLVD., 28TH FL**
MIAMI FL 33131 **MIAMI FL 33131**

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country



☐ CHECK HERE IF MAKING CHANGES

* FEI Number Applied For
82-0572466 ☒ Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

8. Name and Address of Current Registered Agent
MONTIEL, ORLANDO V
201 S. BISCAYNE BLVD., 28TH FL
MIAMI FL 33131

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS / MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	MGR				
	Montiel, Orlando V.				
	201 S. Biscayne Blvd., 28th FL				
	Miami, FL 33131				
	MGR				
	IOXUS Financial Group, Inc.				
	201 S. Biscayne Blvd., 28th FL				
	Miami, FL 33131				

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *[Signature]* REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (4/03)

2003-
REINSTATEMENT 2004
w/o penalty fees