

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

12 NOV -6 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # L10000095957					
1. Entity Name WORLD VIBE LLC					
Principal Place of Business 1514 MYRTLE DRIVE TALLAHASSEE, FL 32301			Mailing Address 1514 MYRTLE DRIVE TALLAHASSEE, FL 32301		
2. Principal Place of Business - No P.O. Box # 402 E Harrison St		3. Mailing Address 402 E Harrison St			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Tallahassee, FL		City & State Tallahassee, FL		4. FEI Number APPLIED FOR	
Zip 32301		Country USA		Applied For Not Applicable	
Zip 32301		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent FERMIN, DAVID 151 RIVERSINK ROAD CRAWFORDVILLE, FL 32327			7. Name and Address of New Registered Agent		
			Name Fermin, David		
			Street Address (P.O. Box Number is Not Acceptable)		
			402 E Harrison St		
			City Tallahassee		FL
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 <u>David Fermin</u> DATE <u>11/6/12</u>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>FILE NOW!!! FEE IS \$238.75 After January 1, 2013, Fee will be \$377.50</p> </div> <div style="width: 30%; text-align: center;"> </div> <div style="width: 30%; text-align: right;"> <p>Make check payable to Florida Department of State</p> </div> </div>					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FERMIN, DAVID 151 RIVERSINK ROAD CRAWFORDVILLE, FL 32327	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Fermin, David 402 E Harrison St Tallahassee, FL 32301	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCKOWN, RHODDY 1514 MYRTLE DRIVE TALLAHASSEE, FL 32301	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FOXWELL, JEREMIAH 1514 MYRTLE DRIVE TALLAHASSEE, FL 32301	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>David Fermin</u> <u>11/6/12</u> <u>dmfermin@gmail.com</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date E-MAIL ADDRESS					

REINSTATEMENT 2012

500241559425
11/06/12--01012--010 ***238.75