

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV -9 PM 1:02

DOCUMENT # L97000000657

1. Limited Liability Company's Name

United Seal Association, LLC
7236 NW 72 Avenue
Miami, FL 33166-2934

REINSTATEMENT 98-200

2. Principal Office Address

7236 NW 72 Av
Suite, Apt. #, etc.

3. Mailing Office Address

SAME
Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Zip Country
33166 Dade

4. State/Country of Formation

Florida

5. Date Organized or Qualified To Do Business in Florida

6/16/97

6. FEI Number

65-0761405

Applied For
Not Applicable

7. CERTIFICATE OF STATUS DESIRED

\$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name George A. Holden

Street Address (P.O. Box Number is Not Acceptable)
7236 NW 72 Avenue

Suite, Apt. #, Etc.

City Miami

State FL Zip Code 33166

000003479930-4
-11/29/00-01063-003
***255.00 ***255.00

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent [Signature]

REGISTERED AGENT MUST SIGN

Date 11/8/00

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	George A. Holden	7236 NW 72 Avenue	Miami, FL 33166
MEM	Edgar L. Periotto	Alameda Barao de Limeira 1524- Apt 1	Sao Paulo, Brazil 0120200
MEM	Maria C. Porto	Alameda Barao de Limeira 1524- Apt 1	Sao Paulo, Brazil 0120200
MEM	Maria Helena Gomez	Cra. 9 #95-74 Apt. 503	Bogota, Colombia

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager [Signature]

Date 8/16/00 Daytime Phone (305) 905-9920

Typed or printed name of signing Managing Member/Manager George A. Holden

CR2E041 (9/98)