RM. TARAS AND SOLUTION OF SOLU PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. LIMITED LIABILITY FLORIDA DEPARTMENT OF STATE **COMPANY** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS DOCUMENT # L03000048848 1. Limited Liability Company's Name Freedom Boat Company, LLC CR2E041 (1/11) 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address 1133 South Alhambra Circle 1133 South Alhambra Circle 4. State/Country of Formation Florida Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Date Organized or Qualified To Do Business in Florida 12/2/2003 City & State City & State Applied For 6. FEI Number Coral Gables, FL Coral Gables, FL 20-3192788 Not Applicable Country Country 7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status 33146 USA 33146 **USA** Name and Address of Current Registered Agent 8. E-mail Address: Moore & Co., P.A. Street Address (P.O. Box Number is Not Acceptable) 355 Alhambra Circle Suite, Apt. #, Etc. #1100 mdelsol@moore-and-co.com (To be used for future annual report notices) Zip Code 33134 Coral Gables 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. Moon of PA 41. /200 Signature of

Registe	Date 7 / July 17				
10. Nami	es and Street Addresses of Managing Members/Manage	rs			
Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip		
MGRM	Fausto Campuzano	1133 South Alhambra Circle	Coral Gables, FL 33146		
			<b>B</b>		
		REINSTATEMENT 2006 - 11			

11 | Legrify 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155. F.S.

Signature of Managin Member/Manager	ng haurt	Campuzun	Date 4/1/2011	Daytime Phone # 305-343-7785
		er Fausto Campuzano, Mana		,

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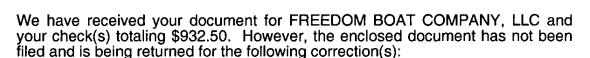
## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2011

FREEDOM BOAT COMPANY, LLC 1133 SOUTH ALHAMBRA CIRCLE CORAL GABLES, FL 33146

SUBJECT: FREEDOM BOAT COMPANY, LLC

Ref. Number: L03000048848



The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Jeraline Saulsberry Regulatory Specialist II

Letter Number: 711A00008953

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