

350.00

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 DEC 21 AM 10:56

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # A00000000406

1. Limited Liability Company's Name  
MEI INVESTMENTS, LTD

2. Principal Office Address  
2127 Brickell Avenue

Suite, Apt. #, etc.  
1401

City & State  
MIAMI, FL

Zip  
33129

Country  
USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

CR2E041 (8/05)

4. State/Country of Formation  
FLORIDA

5. Date Organized or Qualified  
To Do Business in Florida 03/06/2000

6. FEI Number  
20-3834886

☒ 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  
Maria E. Ibanez

Street Address (P.O. Box Number is Not Acceptable)  
2127 Brickell Avenue #1401

Suite, Apt. #, Etc.

City  
Miami

State  
FL

Zip Code  
33129

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

REGISTERED AGENT MUST SIGN

Date

**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
PDT	Maria Elena Ibanez	2127 Brickell Avenue, # 1401	MIAMI, FL 33129

REINSTATEMENT 01-05

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

*Maria Elena Ibanez*

Date 11/30/05

Daytime Phone # (305) 718-8754

Typed or printed name of signing Managing Member/Manager Maria Elena Ibanez