FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

CR2E081 (11/10)

DOCUMENT # F01000003183

1. Corporation Name

LAS USA, Inc.

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
1835 E. Hallandale Beach		1835 E. Hallandale Beach	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
PMB 326		PMB 326	
City & State		City & State	
Hallandale, FL		Hallandale, FL	
Zip	County	Zip	County
33009	USA	33009	USA

4. Date Incorporated or Qualified To Do Business In Florida: 6/15/2001

5. FEI Number: 52-2322777 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Rd.

Suite, Apt. #, etc.:

City: Plantation | State: FL | Zip Code: 33324

NOV - 5 2013

L. SELLERS

8. I, having appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Maria Ozaeta — Maria Ozaeta, Vice President — Date: 10-31-13

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPT	Cinzia Pedicone	1835 E. Hallandale Beach	Hallandale, FL 33009
S	John Vogel	2550 M Street, N.W.	Washington, DC 20037
		REINSTATEMENT 2013	

10. E-mail Address: jvogel@pattonboggs.com
(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and any 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: John H. Vogel, Secretary — John H. Vogel, Secretary — 10/30/13 — 202-457-6460
SIGNATURE REQUIRED IF FILED ON PRINTED FORM OR SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

FL010 - 03/17/2013 Wolters Kluwer CCH

Division of Corporations

F01000003183

Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT
LAS USA, INC.

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