

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

John Smith
Secretary of State
Tallahassee, Florida

02 DEC 20 PM 4:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000011550

1. Limited Liability Company's Name

I AND L USA, LLC.

2. Principal Office Address

4903 Santa Clara Dr.

Suite, Apt. #, etc.

City & State

Orlando, Florida

Zip

32837

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

09/20/2000

6. FEI Number

59-3676573

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

Italo Brett

Street Address (P.O. Box Number is Not Acceptable)

4903 Santa Clara Dr.

Suite, Apt. #, Etc.

City

Orlando

State
FL

Zip Code
32837

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 11/20/2002

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	Camping Morido, S.R.L.	Urb. Alto Chamba Qta. Asia #117	Merida, Venezuela

REINSTATEMENT

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

Date 11/20/2002

Daytime Phone # (321)947-5177

Typed or printed name of signing Managing Member/Manager Italo Brett

CR2E041 (9/01)