

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L01000009216

APPROVED
AND
FILED

02 NOV 20 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L01000009216

Name and Mailing Address

0007124 01 FP 0.352 **PRST T2 0 0615 21060-642491

FREE TRADE ZONE PROPERTY HOLDING COMPANY, LLC

6691 BAY MEADOW DRIVE

C/O WORLD DUTY FREE AMERICAS, INC.
GLEN BURNIE MD 21060-6424



2. New Mailing Address
7900 Red Road, Suite 9, South Miami, FL 33143

City, State, Zip
South Miami, FL 33143

Principal Place of Business
6691 BAY MEADOW DRIVE
C/O WORLD DUTY FREE AMERICAS, INC.
GLEN BURNIE MD 21060-6424

3. New Principal Place of Business Address
7900 Red Road #9

City, State, Zip
South Miami, FL 33143

4. State/Country of Formation
FL

5. Date Organized or Qualified
To Do Business in Florida 06/07/2001

6. FEI Number
59-1493038

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

CORPORATE AGENTS
103 N. MERIDIAN STREET
TOWER LEVEL
TALLAHASSEE, FL 32301

9. Name and Address of New Registered Agent

Name
Harold M. Rifas
Street Address (P.O. Box Number is Not Acceptable)
7900 Red Road #9
City South Miami FL 33143

10. 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 Date 11/11/02
REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	HAGUE, INC.	7900 Red Road #9	South Miami, FL 33143

REINSTATEMENT 2002

TB

12. 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 11/11/02 Daytime Phone # 305-662-8814

Typed or printed name of signing Managing Member/Manager HAROLD M. RIFAS, PRESIDENT

CR2EC84 (8/02)