L01000009628

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

1. DOCUMENT # L01000009628

Name and Mailing Address

2002 NOV -6 PM 12: 21

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

0001045 01 FP 0.352 **PRSRT T4 0 0615 33014-361000

MARIEL ENTERPRISES, LLC
500 NW 83RD STREET
HIALEAH FL 33014-3610

2. New Mailing Address	**4.** State/Country of Formation
500 W 83rd STREET	FL

City, State, Zip
HIALEAH, FL 33014

5. Date Organized or Qualified
To Do Business in Florida   06/15/2001

Principal Place of Business	**3.** New Principal Place of Business Address	**6.** FEI Number	Applied For
500 NW 83RD STREET HIALEAH FL	500 W 83rd STREET	65-1134341	Not Applicable

City, State, Zip
HIALEAH, FL. 33014

7. CERTIFICATE OF STATUS DESIRED ☐   **$5.00** Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent	**9.** Name and Address of New Registered Agent
TRANSGLOBAL CORPORATE ADMINISTRATION, INC. 520 BRICKELL KEY DRIVE SUITE O-305 MIAMI FL 33131	Name MARIA ELENA ZAYAS-BAZAN

Street Address (P.O. Box Number is Not Acceptable)
500 W 83rd STREET

City HIALEAH   FL   Zip Code 33014

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 10/31/02

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
MGRM	ZAYAS-BAZAN, OWEN	500 NW 83RD STREET	HIALEAH FL
MGRM	ZAYAS-BAZAN, MARIA ELENA	500 NW 83RD STREET	HIALEAH FL

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11/06/02--01090--017 **150.00

REINSTATEMENT 2002

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 10/31/02   Daytime Phone # (305) 822-3333

Typed or printed name of signing Managing Member/Manager   MARIA ELENA ZAYAS-BAZAN

CR2E084 (8/02)