LIMITED LIABILITY COMPANY REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # L01000020844

1. Limited Liability Company's Name

VINTAGE 'N VOGUE, LLC

2. Principal Office Address	**3.** Mailing Office Address	
1450 NE 4th Avenue	c/o Allie Sue Spring	**4.** State/Country of Formation: Florida USA
Suite, Apt. #, etc.	Suite, Apt. #, etc. 11 Riverview Court	**5.** Date Organized or Qualified To Do Business in Florida: 01-02-2002
City & State Boca Raton, Florida	City & State Suffolk, Virginia	**6.** FEI Number 65-1158785 — Applied For / Not Applicable
Zip 33432 — Country USA	Zip 23434 — Country USA	**7.** CERTIFICATE OF STATUS DESIRED ☐ — $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name	April Spring
Street Address (P.O. Box Number is Not Acceptable)	1450 NE 4th Avenue
Suite, Apt. #, Etc.	

City	State	Zip Code
Boca Raton,	FL	33432

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 _____ Date _____

REGISTERED AGENT MUST SIGN

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	April Spring	1450 NE 4th Avenue	Boca Raton, FL 33432

REINSTATEMENT 04-05

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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 7/13/05 Daytime Phone # _____

Typed or printed name of signing Managing Member/Manager _____

CR2E041 (10/02)