PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 NOV 27 AM 11:01

DOCUMENT # L02000005649

1. Limited Liability Company's Name
WESTGATE INTERNATIONAL, LLC

CR2E041 (8/05)
10/18/06 010116 014 $300.00

2. Principal Office Address	3. Mailing Office Address
729 TIGRIS LN	729 TIGRIS LN
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: LAKE MARY, FL	City & State: LAKE MARY, FL
Zip: 32746 Country: U.S.A.	Zip: 32746 Country: U.S.A.

4. State/Country of Formation: FL, USA

5. Date Organized or Qualified To Do Business in Florida:

6. FEI Number: 04360770 3 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional [illegible] for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: DEAN A. BUHAY

Street Address (P.O. Box Number is Not Acceptable): 729 TIGRIS LN

Suite, Apt. #, Etc.:

City: LAKE MARY State: FL Zip Code: 32746

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 11/22/06
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
MGR	DEAN A. BUHAY	729 TIGRIS LN	LAKE MARY, FL 32746

REINSTATEMENT
2003 - 2006

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 608.408, 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 11/22/06 Daytime Phone # 407.328.1594

Typed or printed name of signing Managing Member/Manager DEAN A. BUHAY