

LD2000008672

**Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

FILED
05 JUN -6 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN -6 PM 8:01

LIMITED LIABILITY REINSTATEMENT

MARKETWAY INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$250.00

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 05 JUN -6 PM 12:38 TALLAHASSEE, FLORIDA	
DOCUMENT # L02000008672 1. Corporation Name MARKETWAY INVESTMENTS LLC					
2. Principal Office Address 1300 BRICKELL AVE. Suite, Apt. #, etc.		3. Mailing Office Address 1300 BRICKELL AVE. Suite, Apt. #, etc.			
City & State MIAMI, FL Zip 33131	Country US	City & State MIAMI, FL Zip 33131	Country US		
4. Date Incorporated or Qualified To Do Business in Florida 04/11/2002				5. FEI Number 20-2948798	
6. CERTIFICATE OF STATUS DESIRED ☐				7. If a Multiple Filer, enter the number of Filers	
8. Name and Address of Current Registered Agent					
Name MILAGROS SANCHEZ					
Street Address (P.O. Box Number is Not Acceptable) 1300 BRICKELL AVE.					
Suite, Apt. #, Etc.					
City MIAMI					
State FL					
Zip Code 33131					
9. I, being appointed the registered agent of the above named corporation, and familiar with and accept the obligations of section 607.0005 or 617.0003, F.S.					
Signature of Registered Agent <i>[Signature]</i> MILAGROS SANCHEZ Date 6-13-2005					
REGISTERED AGENT MUST SIGN					
10. Name and Street Address of Each Officer and/or Director (Florida S Corporations must list at least 2 directors)					
Title	Name of Officer and/or Directors	Street Address of Each Officer and/or Director		City/State/Zip	
Mgr R.	MINDY RODNEY	1300 BRICKELL AVE.		MIAMI, FL 33131	
11. I certify that I am an officer or director or the receiver or delegate employed in agents this application as provided for in chapter 607 or 617, F.S. In other parts of when filing this reinvestment application, the person for whom this has been submitted, the corporate status of the requirements of section 607.0401 or 617.0003, F.S., that all fees owed by the corporation have been paid and the names of all persons listed on this form do not qualify for an exemption under section 159.07(5)(b), F.S. 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: <i>[Signature]</i> MINDY RODNEY Date 6-13-2005 (20)140625-5880					
SIGNATURE AND TYPED OR PRINTED NAME OF PERSON OFFICER OR DIRECTOR					

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06 Jun 2005 16:19

AIR#CORPORATE#SERVICES

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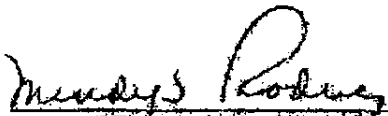
DATE: 05-13-2004

TO: DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FROM: MARKETWAY INVESTMENTS LLC
MINDY RODNEY

WE DID NOT RECEIVE FROM YOU THE UNIFORM BUSINESS REPORT BY MAIL.
PLEASE FILE OUR ANNUAL REPORT AND WAIVE THE PENALTY
IF YOU HAVE ANY QUESTIONS PLEASE CONTACT US AT 305-679-5880.

THANKS,


MARKETWAY INVESTMENTS LLC
MINDY RODNEY

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