

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**

FILED

2005 APR 20 PM 2:23

**DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**

DOCUMENT # L0200006537

1. Limited Liability Company's Name

A LOT OF FUN VACATIONS PROMOTIONS, LLC

2. Principal Office Address

7373 Spring Villas Circle

Suite, Apt. #, etc.

City & State

Orlando, FL 32819

Zip

32819

Country

U.S.

3. Mailing Office Address

7373 Spring Villas Circle

Suite, Apt. #, etc.

City & State

Orlando, FL

Zip

32819

Country

U.S.

4. State/Country of Formation

FL, U.S.

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

07/01/2002

6. FEI Number

03-0469709

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

Name

Ruben D. Toro

Street Address (P.O. Box Number is Not Acceptable)

7345 Sand Lake Rd. #

Suite, Apt. #, Etc.

#204

City

Orlando

State

FL

Zip Code

32819

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

Ruben D. Toro

Date

3/28/05

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
MBR	Jesenia E. Herrera-Cardoso	7373 Spring Villas Circle	Orlando, FL 32819
MBR	Eduardo Cardoso	7373 Spring Villas Circle	Orlando, FL 32819

REINSTATEMENT 2003-05

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

Jesenia A. Cardoso

Date

3/28/05

Daytime Phone #

407-383-0528

Typed or printed name of signing Managing Member/Manager

CR2E041 (10/02)