5 124

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		Secretar	TMENT OF STATE y of State orporations	JIVISI	FILED RETARY OF STATE ON OF CORPORATION AUG 30 AM 6:51	,,,,	
DOCUMENT # L02000625840							
Limited Liability Company's Name							
Universal Marketing Solution, LLC				07 207018383119 3233.75			
				CR2E041 (05/10)			
Principal Office Address - No P.O. Box # Mailing Office Address							
11213 Crescent T	Bay Blud	614 W. Huy	6/4 W. Hwy 5 ⁻⁰ Suite, Apt. #, etc.		4. State/Country of Formation		
Suite, Apt. #, etc.				Jorida 5. Date Organized or Qualified			
City & State		3/2 City & State		To Do Business in Florida 10-1-200 2			
l		Chermont F1		6. FEI Number Applied For			
Clermont, F(irv	Zip Zip	Country	32 .00	33936	Not Applicable	
34711 US	A	347//	USA	7. CERTIFICATE		Additional Fee required a Certificate of Status	
		Current Registered Agen					
Name /	۸ .	4				[
James ilianond							
Street Address (P.O. Sox Number is Not Acceptable) 1/213 CLESSENT Bay Blud							
Suite, Apt. #, Etc.				08/31/1001007002 **416.25			
City State Zip Code					ee seem com	THE FIGURE	
Clument FL 347/1						1	
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 Agent Page 2-26-2016 REGISTERED AGENT MUST SIGN Date 7-26-2016							
10. Names and Street Address	ses of Managing Mem	bers/Managers			<u> </u>		
Tistas	Name of ng Members/Manage		Street Address of Each Managing Member/Manag		City / State /	Zip	
Marm Heather Leith 1/2/3 Croscent Bay Blud					Clermond, 11	34711	
$M_{\text{tot}} = M_{\text{tot}} = M_{tot} = M_{\text{tot}} = M_{\text{tot}} = M_{\text{tot}} = M_{\text{tot}} = M_{t$							
1191 James	Mond	1/26	Creseent Ba	4 (3103)	Cumont, 31	34/11	
	^	700					
REINSTATEMENT 2007 - 2010							
11. E-mail Address:— Jim Um Solution Se qmail, com (To be used for future annual report notifications)							
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 filling 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							
Typed or printed name of signing Managing Member/Manager							



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 AUG 30 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

August 2, 2010

UNIVERSAL MARKETING SOLUTIONS, LLC 614 W HWY 50 312 CKERMONT, FL 34711

SUBJECT: UNIVERSAL MARKETING SOLUTIONS, LLC

Ref. Number: L02000025840

We have received your document for UNIVERSAL MARKETING SOLUTIONS, LLC and check(s) totaling \$243.75. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$416.25. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2007 through 2010;and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$660.00.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 710A00018563