

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000017042

FILED  
Aug 08, 2005  
Secretary of State

Entity Name: A-1 VIP TRANSPORTATION, LLC

## Current Principal Place of Business:

3220 E. JERSEY STREET  
ORLANDO, FL 32806 US

## New Principal Place of Business:

14143 SNEAD CIRCLE  
ORLANDO, FL 32837 US

## Current Mailing Address:

3220 E. JERSEY STREET  
ORLANDO, FL 32806 US

## New Mailing Address:

14143 SNEAD CIRCLE  
ORLANDO, FL 32837 US

FEI Number: 65-1193535

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAGEN, PATRICIA  
3220 E. JERSEY STREET  
ORLANDO, FL 32806 US

## Name and Address of New Registered Agent:

HAGEN, PATRICIA  
14143 SNEAD CIRCLE  
ORLANDO, FL 32837 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PATRICIA HAGEN

08/08/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: HAGEN, PATRICIA  
Address: 3220 E. JERSEY STREET  
City-St-Zip: ORLANDO, FL 32806 US

Title: MGR ( ) Delete  
Name: BARWICK, MITZI  
Address: 5018 PELLEPORT AVENUE  
City-St-Zip: ORLANDO, FL 32812 US

Title: MGR ( ) Delete  
Name: BARWICK, DR. WALTER  
Address: 5018 PELLEPORT AVENUE  
City-St-Zip: ORLANDO, FL 32812 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: HAGEN, PATRICIA  
Address: 14143 SNEAD CIRCLE  
City-St-Zip: ORLANDO, FL 32837 US

Title: MGR (X) Change ( ) Addition  
Name: BARWICK, WALTER  
Address: 5018 PELLEPORT AVENUE  
City-St-Zip: ORLANDO, FL 32812 US

Title: MGR (X) Change ( ) Addition  
Name: BARWICK, SCOTT  
Address: 1017 STINSON ST.  
City-St-Zip: ST. PAUL, MN 55103 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WALTER BARWICK

CEO

08/08/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date