

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000030452

FILED  
Oct 11, 2004  
Secretary of State

Entity Name: MONEY ABROAD LLC

**Current Principal Place of Business:**

1213 W. NEW HAMPSHIRE ST.  
ORLANDO, FL 32804

**New Principal Place of Business:**

4460 OAK DALE RD  
SMYRNA, GA 30080

**Current Mailing Address:**

1213 W. NEW HAMPSHIRE ST.  
ORLANDO, FL 32804

**New Mailing Address:**

4460 OAK DALE RD  
SMYRNA, GA 30080

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

TOFFETTI, GEOFFREY S  
1213 W. NEW HAMPSHIRE ST.  
ORLANDO, FL 32804 US

**Name and Address of New Registered Agent:**

TOFFETTI, SHEREEN V  
1213 W. NEW HAMPSHIRE ST.  
ORLANDO, FL 32804 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: SHEREEN V. TOFFETTI

10/11/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: TOFFETTI, GEOFFREY S  
Address: 1213 W. NEW HAMPSHIRE ST.  
City-St-Zip: ORLANDO, FL 32804

Title: MGRM (X) Delete  
Name: POWERS, RYAN T  
Address: 4460 OAK DALE RD  
City-St-Zip: SMYRNA, GA 30080

Title: MGRM (X) Delete  
Name: POST, ANDREW R  
Address: 806 LINDENWALD LN  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGRM (X) Delete  
Name: BIRKEL, STEPHEN M JR.  
Address: 116 SPRUELL SPRINGS RD  
City-St-Zip: ATLANTA, GA 30342

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: POWERS, RYAN T  
Address: 4460 OAK DALE RD  
City-St-Zip: SMYRNA, GA 30080

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RYAN T. POWERS

MGRM

10/11/2004

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