2004 LIMITED LIABILITY COMPANY REINSTATEMENT

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1. Entity Nam GLOBAL		ORS SERVICES, L	LC				-	g g		J.	
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Principal Plac X 79206 3W 7 X MAMA, X X 3	% X 35 X X X X		Mailing Address 冯美老子说为第5天在在一个 MAMI, FE 35186			SECRETARY OF STAFE TALLAHASSEE, FLORIDA					
2. Principal P	Place of Busin	ness	3. Mailing Address								
		Court	3. Mailing Address 560040 Suite, Apt. #, etc.					3 {			
Suite, Apt. #, etc.							10052004	REIN-LLC	CR2E1	101 (6/04)	
			Miamii, Florida				4. FEI Numb	09006			plied For t Applicable
33177	Country usa		3 ⁷ 3256 05		Ä	5. Certific		e of Status Desired		\$5.00 Add ee Required	
	6. Name	and Address of Current	Registered Agent		Name		7. Name an	d Address of New	Registered A	gent	
GONZALE		\ 86TH AVENUE		Street Address (P.O. Box Number is Not Acceptable)							
MIAMI, FL		0011171121102									
					City				FL	Zip Code	
8. 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. I am familiar with, and accept											
the obligations of registered agent. SIGNATURE											
SIGNATORE	Signature, typed	or printed name of registered agent a	and title if applicable. (NOT	E: Register	ed Agent sign:	ature requin	ed when reinstating	g)	DATE		
		EE IS \$150.00 5, Fee will be \$200.00							ike check pa da Departme	•	•
9.	MGRM	MANAGING MEMBE		10.		MGI	зм		S/CHANGES	TF1 or	
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CITY-ST-ZIP	certify that th	e information supplied with	this filling does not qualify fo	r the exe	-ST-ZIP mption stat	ted in Se	ction 119.07(3)(i), Florida Statutes	s. I further certi	fy that the in	formation
11. I hereby certify that the information supplied with this filing does not qualify 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 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: Eric A González 10/12/04 305/585-2300											
SIGNATURE: LEVE H. GONZOLEZ 10/12/09 305/38-2500 SIGNATURE AND TREE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Despring Prone #											