2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# L04000087081

Entity Name: LICENSED 2 TRAVEL, LLC

Current Principal Place of Business:

9073 N.W. 23RD PLACE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

2365 LAKEVIEW DRIVE
SUITE E
BEVERCREEK, OH 45413 US

Current Mailing Address:

9073 N.W. 23RD PLACE
CORAL SPRINGS, FL 33065

New Mailing Address:

2365 LAKEVIEW DRIVE
SUITE E
BEVERCREEK,, OH 45431 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
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:

GOLDBERG, JEFFREY
9073 N.W. 23RD PLACE
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

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: JEFFERY GOLDBERG

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CLAYTON, JAMES W
Address: 1239 OCEANSHORE BLVD., #2C3
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGRM ( ) Delete
Name: GOLDBERG, JEFFREY
Address: 9073 N.W. 23RD PLACE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, 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: JEFFREY GOLDBERG PRES 01/11/2008

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