

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LIMITED LIABILITY REINSTATEMENT
GLOBAL ADVANTAGE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$932.50

RECEIVED

10 NOV 22 PM 4:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2010 NOV 22 AM 9:49

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

2015 NOV 22 AM 8:49

 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # L04000091485

1. Limited Liability Company's Name

GLOBAL ADVANTAGE LLC

CR2E041 (05/10)

 2. Principal Office Address - No P.O. Box #
 7501 SW 82ND COURT

Suite, Apt. #, etc.

City & State

MIAMI FL

 Zip
 33143

 Country
 USA

3. Mailing Office Address

7501 SW 82ND COURT

Suite, Apt. #, etc.

City & State

MIAMI FL

 Zip
 33143

 Country
 USA

 4. State/Country of Formation
 FL

 5. Date Organized or Qualified
 To Do Business in Florida 12/17/2004

6. FCI Number

☒ Applied For
☐ Not Applicable

 7. CERTIFICATE OF STATUS DESIRED ☐ \$5.00 Additional Fee required
 for a Certificate of Status

8. Name and Address of Current Registered Agent

 Name
 CORPORATE CREATIONS NETWORK INC.

Street Address (P.O. Box Number is Not Acceptable)

11380 PROSPERITY FARMS ROAD #221E

Suite, Apt. #, Etc.

 City
 PALM BEACH GARDENS

 State
 FL

 Zip Code
 33410

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

Valerie Hawk-Donohue, Special Secretary 1/22/10

REGISTERED AGENT MUST SIGN

10. Name and Street Address of Managing Members/Managers

Title	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City/State/Zip
MGR	MARIO A VILLENA	7501 SW 82ND COURT	MIAMI FL 33143
MGR	SHEWEN ZHOU	1462 NW 158 AVENUE	PEMBROKE PINES FL 33028

REINSTATEMENT

 05-10
 CR 11-23-10

11. Email Address

(To be used for future annual report notifications)

 I, being the managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S., further certify that when
 filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company meets the requirements of section 608.403, 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

Date: 11/22/10

Daytime Phone #: 561-694-8107

Typed or printed name of signing Managing Member/Manager: Valerie Hawk-Donohue, Attorney in fact