

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 JUN 15 PM 3:26

DOCUMENT # L06000008823

1. Limited Liability Company's Name

CONEXION LATINA, LLC

900236407009
06/14/12--01028--013 **818.75

CR2E041 (1/11)

2. Principal Office Address - No P.O. Box # 1034 Sycamore Drive		3. Mailing Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Rockledge, Florida		City & State	
Zip 32955	Country USA	Zip	Country

4. State/Country of Formation Florida	
5. Date Organized or Qualified To Do Business in Florida 01/25/2006	
6. FEI Number 20-4182134	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent			
Name German R. Castellanos			
Street Address (P.O. Box Number is Not Acceptable) 1034 Sycamore Drive			
Suite, Apt. #, Etc.			
City Rockledge	State FL	Zip Code 32955	

E-mail Address:

germain@atouchofclassbus.com
(To be used for future annual report notices)

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

German R. Castellanos

Date

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	German R. Castellanos	1034 Sycamore Drive	Rockledge, Florida 32955

REINSTATEMENT 2008-2012

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing
Member/Manager

German R. Castellanos

Date

6-13-2012

Daytime Phone #

321-945-8699

Typed or printed name of signing Managing Member/Manager **German R. Castellanos**

JUN 1 8 2012

T. HAMPTON



KRISTEN M. JACKSON
FOUNDING PARTNER
kjackson@kmjlawfirm.com

Admitted In Florida

KRISTEN M. JACKSON ^{AV 1}

T. MICHAEL WOODS* ^{AV}

JUDITH E. DELABAR*

DAVID R. WOODS*

JOY RAGAN*

*Special Counsel

ADMINISTRATORS

PAULA FERREIRA

JOHN J. EARNEST

ADMITTED IN OTHER
STATES & TERRITORIES

1. Texas

ATTORNEY RATINGS

AV - Martindale-Hubbell Highest
Peer Review Rating

June 13, 2012

Via Express Mail: # EB406072094US

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Conexion Latina, LLC
Doc No.: L06000008823

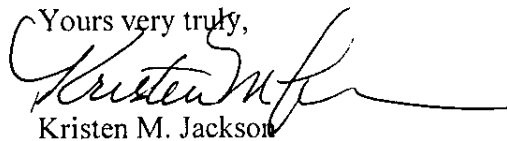
Enclosed are the following to change the name of the LLC and to reinstate it to active status:

1. Articles of Amendment of Articles of Organization
2. Reinstatement of LLC
3. Check for \$818.75 for the amendment fee of \$25.00 and reinstatement fee of \$793.75

Please file the Articles of Amendment and reinstate the LLC as soon as possible.

If you have any questions, please contact me.

Yours very truly,



Kristen M. Jackson

/kmj
Enclosures