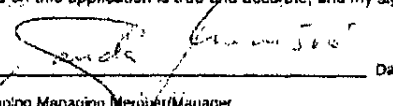


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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # LOG000076644 1. Limited Liability Company's Name International Luxury Developments LLC			
2. Principal Office Address - No P.O. Box # 2578 Enterprise Road Suite, Apt. #, etc.		3. Mailing Office Address 2578 Enterprise Road Suite, Apt. #, etc.	
City & State Orange City, FL Zip 32763		City & State Orange City, FL Zip 32763	
Country USA		Country USA	
4. State/Country of Formation Florida		5. Date Organized or Qualified to Do Business in Florida 08/02/2006	
6. FEI Number NA		☐ 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 Florida Filing & Search Services Inc. Street Address (P.O. Box Number is Not Acceptable) 155 Office Plaza Drive Suite, Apt. #, Etc. Suite A City Tallahassee State FL Zip Code 32301			
☒ A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement fee be waived.			
9. I, being appointed the Registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 606, F.S. Signature of Registered Agent  Date 11/10/09 REGISTERED AGENT MUST SIGN			
10. Names and Street Addresses of Managing Members/Managers			
Titles	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City/State/Zip
MEM	Sanda Marusic	2578 Enterprise Road	Orange City, FL 32763
REINSTATEMENT 2007-2009			
11. E-mail Address: _____ (To be used for future annual report notifications)			
12. I certify that I am a managing member/manager or the receiver or trustee empowered to execute this application as provided in Chapter 606, 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 609.408, 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 _____ Daytime Phone # _____ Typed or printed name of signing Managing Member/Manager _____			

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 11-10-09

NAME: INTERNATIONAL LUXURY DEVELOPMENTS, LLC

TYPE OF FILING: REINSTATEMENT

COST: \$416.25

RETURN:

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DIVISION OF CORPORATIONS
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TO ACKNOWLEDGE
SUFFICIENCY OF FILING

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

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