

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

ED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
09 DEC 24 PM 12:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L070000 77942

1. Limited Liability Company's Name

Orlando International Realty LLC

CR2E041 (11/09)

2. Principal Office Address - No P.O. Box #

8808 Southern Breeze Dr.

3. Mailing Office Address

(Same)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Zip

32836

Country

USA

Zip

Country

4. State/Country of Formation

5. Date Organized or Qualified  
To Do Business in Florida

6. FEI Number

26-0640828

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

Deborah M. Jordan

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

8808 Southern Breeze Dr.

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32836

☐ 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 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 608, F.S.

Signature of  
Registered Agent

Deborah M. Jordan

Date 12-8-09

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
MEM	Deborah M. Jordan	8808 Southern Breeze Dr.	Orlando, FL 32836
			300163546613 12/24/09--01035--005 **138.75
			300163546613 12/11/09--01035--005 **138.75
			S. HAWKES DEC 28 2009
			EXAMINER

11. E-mail Address: oirealty@hotmail.com

(To be used for future annual report notifications)

12. 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.

Signature of

Managing Member/Manager

Deborah M. Jordan

Date 12-8-09

Daytime Phone #

407-427-0720

Typed or printed name of signing Managing Member/Manager

Deborah M. Jordan



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 16, 2009

ORLANDO INTERNATIONAL REALTY LLC  
8808 SOUTHERN BREEZE DR  
ORLANDO, FL 32836

SUBJECT: ORLANDO INTERNATIONAL REALTY LLC  
Ref. Number: L07000077942

We have received your document for ORLANDO INTERNATIONAL REALTY LLC and your check(s) totaling \$238.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2008 through 2009; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$138.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II

Letter Number: 609A00038247