

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000036510

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** JOYFUL POINT TOURS & CONFERENCE LLC

**Current Principal Place of Business:**

4141 STAFFORDSHIRE DRIVE  
LAKELAND, FL 33809

**New Principal Place of Business:**

**Current Mailing Address:**

4141 STAFFORDSHIRE DRIVE  
LAKELAND, FL 33809

**New Mailing Address:**

PO BOX 2223  
BARTOW, FL 33831

**FEI Number:** 26-2371877      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

**Name and Address of New Registered Agent:**

WANG, JIANFEN  
4141 STAFFORDSHIRE DRIVE  
LAKELAND, FL 33809      US

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: JIANFEN WANG

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** WANG, JIANFEN  
**Address:** 4141 STAFFORDSHIRE DRIVE  
**City-St-Zip:** LAKELAND, FL 33809

I hereby 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: JIANFEN WANG

MGRM

04/05/2010

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