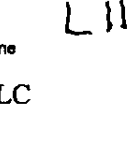


WILLING

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 13 FEB 12 AM 9:48 SECRETARY OF STATE TALLAHASSEE, FLORIDA													
DOCUMENT # L11000016671		1. Limited Liability Company's Name Sea 2 Sea Investors, LLC															
2. Principal Office Address - No P.O. Box # 2443 SE 28th St. <small>Suite, Apt. #, etc.</small>		3. Mailing Office Address P.O. Box 315022 <small>Suite, Apt. #, etc.</small>		4. State/Country of Formation Florida													
City & State Cape Coral, FL		City & State Cape Coral, FL FL		5. Date Organized or Qualified To Do Business in Florida February 8, 2011													
Zip 33904	Country	Zip 33990	Country	6. FEI Number 27-5067059													
				7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status													
8. Name and Address of Current Registered Agent Name: Corporation Service Company Street Address (P.O. Box Number is Not Acceptable): 1201 Hayes St. Suite, Apt. #, Etc.: City: Tallahassee				E-mail Address: 200244661512 02/12/13--01023--025 **377.50 sea2seainvestors@gmail.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 [Signature] A.V.P. Date 2/8/13 <small>REGISTERED AGENT MUST SIGN</small>																	
10. Names and Street Addresses of Managing Members/Managers <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Titles</th> <th style="width: 30%;">Name of Managing Members/Managers</th> <th style="width: 30%;">Street Address of Each Managing Member/Manager</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>Eric Honcharenko</td> <td>2443 SE 28th St</td> <td>Cape Coral, FL 33904</td> </tr> <tr> <td colspan="4" style="height: 100px; text-align: center; vertical-align: middle;"> <div style="font-size: 2em; transform: rotate(-5deg);">REINSTATEMENT</div> <div style="font-size: 1.5em; transform: rotate(-5deg);">2012-13</div> <div style="position: absolute; bottom: 10px; right: 10px; text-align: right;"> S. HAWKES FEB - 2013 EXAMINER </div> </td> </tr> </tbody> </table>						Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MGRM	Eric Honcharenko	2443 SE 28th St	Cape Coral, FL 33904	<div style="font-size: 2em; transform: rotate(-5deg);">REINSTATEMENT</div> <div style="font-size: 1.5em; transform: rotate(-5deg);">2012-13</div> <div style="position: absolute; bottom: 10px; right: 10px; text-align: right;"> S. HAWKES FEB - 2013 EXAMINER </div>			
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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 [Signature] Date 2/8/13 Daytime Phone (239) 357-7593 <small>Typed or printed name of signing Managing Member/Manager</small> Eric Honcharenko																	