(1)

APPROVED
AND
FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

01 FEB 13 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L94000000350

1. Limited Liability Company's Name

EXQUISITE HOME JOURNEY'S END, L.C.

REINSTATEMENT 1998-2001

2. Principal Office Address		**3.** Mailing Office Address	
6800 S.W. 40th St.		6800 SW 40th st.	
Suite, Apt. #, etc. PMB #455		Suite, Apt. #, etc. PMB #455	
City & State Miami		City & State Miami FL	
Zip 33155	Country USA	Zip 33155	Country USA

4. State/Country of Formation: FLORIDA, USA

5. Date Organized or Qualified To Do Business in Florida:

6. FEI Number 65-0507350 ☐ 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: CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable): 1201 HAYS STREET

Suite, Apt. #, Etc.:

City: TALLAHASSEE | State: FL | Zip Code: 32301

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: Clement W. Jones — Date: 2-12-2001

REGISTERED AGENT MUST SIGN

CR2E041 (9/00)

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
MGR/MBR	Luis A Alvarez	6800 S.W. 40th St.	miAmi, FL 33155
MGR	Trevor Resnick	3200 S.W. 60th Ct.	miAmi, FL 33155
MGR	Marcel Denny	3200 S.W 60th CT.	miAmi, FL 33155
MGR	Irene SAS	6800 SW 40th ST	miAmi, FL 33155
			600003576756--8
			JB 2-14-01

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.

Signature of Managing Member/Manager: [signature] Date: 1/29/01 Daytime Phone # 305-663-8435

Typed or printed name of signing Managing Member/Manager: Luis A. Alvarez, MGR

(2)

CSC THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 000125 7238332 Patricia Pizzuto

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ ~~150.00~~ 300.00

ORDER DATE : February 12, 2001

ORDER TIME : 10:48 AM

ORDER NO. : 000125-010

CUSTOMER NO: 7238332

CUSTOMER: Mr. Luis Alvarez
Mr. Luis Alvarez
6800 Sw 40th St
Pnb 455
Miami, FL 33155

DOMESTIC FILINGS

NAME: EXQUISITE HOME JOURNEYS
END, L.C.

XX ___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS _____

RECEIVED
01 FEB 13 AM 11:26
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA