

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 FEB 12 PM 2:40

DOCUMENT # L98-140

1. Limited Liability Company's Name

VISWORLD INTERNATIONAL L.L.C.
5333 COLLINS AVE #305
MIAMI BEACH, FL 33140

9/29/00

2. Principal Office Address

5333 COLLINS AVE

3. Mailing Office Address

P.O. Box 402984

Suite, Apt. #, etc.

305

Suite, Apt. #, etc.

City & State

MIAMI BEACH, FL

City & State

MIAMI BEACH, FL

Zip

33140
FL

Country

USA

Zip

33140
FL

Country

USA

4. State/Country of Formation

FLORIDA - USA

5. Date Organized or Qualified
To Do Business in Florida

01/30/98

6. FEI Number

65-0820015

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

MIRIAM NUNEZ MGL

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

5333 COLLINS AVE

Suite, Apt. #, Etc.

305

City

MIAMI BEACH

State

FL

Zip Code

33169

300003676663-9
-02/13/01--01060--002
****200.00--****200.00

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

MIRIAM NUNEZ MGL

REGISTERED AGENT MUST SIGN

Date

12/1/00

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	MIRIAM NUNEZ	5333 COLLINS AVE #305	MIAMI BEACH, FL 33140

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

Date

12/01/00

Daytime Phone #

305-866-6808

Typed or printed name of signing Managing Member/Manager

MGR - MIRIAM NUNEZ

CR2E041 (9/99)