

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

2003 NOV 19 PM 3:46

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

1. DOCUMENT # L98000002259

Name and Mailing Address

0006811 01 AT 0-353 **AUTO T6 0 0615 33156-710425

~~LEISURE DESTINATION, L.L.C.~~
LEISURE DESTINATION, L.L.C.
13025 S.W. 60 AVE.
MIAMI FL 33156-7104



2. New Mailing Address

City, State, Zip

Principal Place of Business

13025 S.W. 60 AVE.
MIAMI FL 33156

3. New Principal Place of Business Address

City, State, Zip

4. State/Country of Formation
FL

5. Date Organized or Qualified
To Do Business in Florida

10/13/1998

6. FEI Number

58-2420018

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

ASHLEY, RONALD F
13025 S.W. 60 AVE.
MIAMI FL 33156

9. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

10. 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

Ronald F. Ashley
SIGNATURE REQUIRED

Date 11-12-03

REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	ASHLEY, RONALD F	13025 S.W. 60 AVE.	MIAMI FL 33156

400024841064

11/19/03--01006--029 **155.00

REINSTATEMENT

2003

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

Ronald F. Ashley
SIGNATURE REQUIRED

Date 11/12/03

Daytime Phone # 305-665-5087

Typed or printed name of signing Managing Member/Manager

RONALD F. Ashley

CR2E084 (7/03)