

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
AND
FILED

03 MAR 21 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10100000-1959



DIVISION OF CORPORATIONS

DOCUMENT # M01000001959

1. Limited Liability Company's Name
PAYU2TRAVEL.COM
1263 S. Hwy 17-92
LONGWOOD, FLORIDA 32750

2. Principal Office Address
1263 S. Hwy 17-92
Suite, Apt. #, etc.

3. Mailing Office Address
1263 S. Hwy 17-92
Suite, Apt. #, etc.

City & State
LONGWOOD, FLORIDA

Zip
32750

Country
USA

REINSTATEMENT

2002-
2003

4. State/Country of Formation
FLORIDA

5. Date Organized or Qualified To Do Business in Florida
06/08/2001

6. FEI Number
59-3726197

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
PETERSON, SCOT

Street Address (P.O. Box Number is Not Acceptable)
1263 S. Hwy 17-92

Suite, Apt. #, Etc.

City
LONGWOOD

State
FL

Zip Code
32750

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 **REGISTERED AGENT MUST SIGN**

Date 2-28-03

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
MGRM	PETERSON, SCOT	1263 S. Hwy 17-92	LONGWOOD, FL 32750

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** 2-28-03 **Daytime Phone #** 407-699-7150

Typed or printed name of signing Managing Member/Manager SCOT PETERSON MGRM

CR2ED41 (9/99)