

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M04000002777

1. Limited Liability Company's Name

International Marketing Systems Group, LLC

2. Principal Office Address - No P.O. Box #
4700 Millenia Blvd

3. Mailing Office Address
4700 Millenia Blvd

Suite, Apt. #, etc.
Suite #175

Suite, Apt. #, etc.
Suite #175

City & State
Orlando, Florida

City & State
Orlando, Florida

Zip
32839

Country
USA

Zip
32839

Country
USA

4. State/Country of Formation
Nevada

5. Date Organized or Qualified
To Do Business in Florida **July 13, 2004**

6. FEI Number
47-0941672

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
Lawrence Durbin

Street Address (P.O. Box Number is Not Acceptable)
4700 Millenia Blvd

Suite, Apt. #, Etc.
Suite #175

City
Orlando

State
FL

Zip Code
32839

☒ A \$100 reinstatement fee is imposed, except
in circumstances which the entity did not
receive the prior notices. By checking this
box, you are certifying the prior notices were
not received and requesting the \$100
reinstatement be waived.

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 Lawrence W Durbin
REGISTERED AGENT MUST SIGN

Date **March 28, 2007**

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	George Aucott	4700 Millenia Blvd, Suite 175	Orlando, Florida 32839
MGRM	Lawrence W Durbin	4700 Millenia Blvd, Suite 175	Orlando, Florida 32839
MGRM	James Larson	4700 Millenia Blvd, Suite 175	Orlando, Florida 32839
MGRM	Robert Trochta	4700 Millenia Blvd, Suite 175	Orlando, Florida 32839

REINSTATEMENT 05-07

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 Lawrence W Durbin Date **March 28, 2007** Daytime Phone # **407-210-3918**

Typed or printed name of signing Managing Member/Manager **Lawrence W Durbin, Managing Member**