

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

00 DEC 20 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 2000

DOCUMENT #

M99-1420

1. Limited Liability Company's Name

ONE EXPRESS SERVICES, L.L.C.

2. Principal Office Address

12159 SW 132 Court P.O. Box 770186

Suite, Apt. #, etc.

101B

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33186

Country

Zip

33177

Country

4. State/Country of Formation

UTAH

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

Sept 13/99

6. FEI Number

87-0617782

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$3.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

SVEN HERBERT BENSON

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

13373 SW 151 Terrace

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33186

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

Sven Benson
REGISTERED AGENT MUST SIGN

Date

December 16/00

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
mgrm	Sven H. Benson	13373 SW 151 Terr	Miami FL 33186
mgrm	Richard Watchman	13373 SW 151 Terr	Miami FL 33186

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

Richard Watchman

Date

12/16/00

Daytime Phone #

305 233-7229

Typed or printed name of signing Managing Member/Manager

Richard Watchman