

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000095037

Entity Name: AI FLORIDA HOLDINGS, INC.

FILED
Oct 06, 2014
Secretary of State

Current Principal Place of Business:

C/O AFI USA, 229 WEST 43RD STREET, 10TH FL
NEW YORK,, NY 10036

New Principal Place of Business:

C/O AFI USA, 232 WEST 44TH STREET
1 MEZZANINE
NEW YORK, NY 10036

Current Mailing Address:

C/O AFI USA, 229 WEST 43RD STREET, 10TH FL
NEW YORK,, NY 10036

New Mailing Address:

C/O AFI USA, 232 WEST 44TH STREET
1 MEZZANINE
NEW YORK, NY 10036

FEI Number: 41-2142373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ERIC WOLZ FOR INCORP SERVICES, INC.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: NOVOGROCKI, AVRAHAM
Address: C/O AFI USA, 232 WEST 44TH ST.,1 MEZZANINE
City-St-Zip: NEW YORK, NY 10036

Title: PTD
Name: NOVOGROCKI, AVRAHAM
Address: C/O AFI USA, 232 WEST 44TH ST.,1 MEZZANINE
City-St-Zip: NEW YORK, NY 10036

Title: SCOO
Name: STEIN, DAMIEN
Address: C/O AFI USA, 232 WEST 44TH ST.,1 MEZZANINE
City-St-Zip: NEW YORK, NY 10036

Title: CFO
Name: SARIG, AMIR
Address: C/O AFI USA, 232 WEST 44TH ST.,1 MEZZANINE
City-St-Zip: NEW YORK, NY 10036

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAMIEN STEIN

SCOO

10/06/2014

Electronic Signature of Signing Officer or Director

Date