2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000038942

Entity Name: MARILINS INTERNATIONAL, INC.

FILED Sep 17, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
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19638 COLORADO CIRCLE 2126 SW NEWPORT ISLES BLVD BOCA RATON, FL 33434 PORT ST. LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

19638 COLORADO CIRCLE 2126 SW NEWPORT ISLES BLVD BOCA RATON, FL 33434 PORT ST. LUCIE, FL 34953 US

FEI Number: 20-4513737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELO ENTERPRISES, INC. 301 CRAWFORD BLVD. #201-A BOCA RATON, FL 33432 US LINS, MARIA 2126 SW NEWPORT ISLES BLVD PORT ST. LUCIE, FL 34953 US

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: MARIA LINS 09/17/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition LINS, MARIA LINS, MARIA Name: Name: 19638 COLORADO CIRCLE Address: 2126 SW NEWPORT ISLES BLVD Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: Title: (X) Change () Addition () Delete FERNANDES, MARJORIE J Name: FERNANDES, JULIO Name: 19638 COLORADO CIRCLE 2126 SW NEWPORT ISLES BLVD Address: Address: BOCA RATON, FL 33434 PORT ST. LUCIE, FL 34953 US City-St-Zip: City-St-Zip:

 Title:
 () Delete
 Title:
 D () Change (X) Addition

 Name:
 Name:
 FERNANDES, FRANCISCO J

 Address:
 Address:
 2126 SW NEWPORT ISLES BLVD

 City-St-Zip:
 City-St-Zip:
 PORT ST. LUCIE, FL 34953 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARIA LINS PD 09/17/2007