PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	Secreta	RTMENT OF STATE ary of State corporations	2021 JAN 22 PH 12: 07
DOCUMENT # \mathscr{O} .970000	51834		
Liberty International Holding	g Corporation		
			000358633730 01722/31-0109-015 #1835.00
Principal Office Address - No P.O. Box # 3. Mailing Office Address Same			
Sulle, Apt. #, etc. Unit 26496			4. Date incorporated or Qualified
City & State City & State		 	To Do Business in Florida 6/12/1997 S. FEI Number Applied For
Scottsdale , AZ	Z _I p	Country	65-0759512 — Аррико Рог Not Applicable
85255			6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address	of Current Registered Ag	ent	
Registered Agent Inc.			
Street Address (P.O. Box Number is Not Acceptable) 7901 4th St N			
Stite, Apt. #, Etc Ste. 300			
St. Petersburg	<u>-</u>	FL Zin Car 702	2
8. I, being appointed the registered agent of the ab	ove named corporation, ar	n familiar with and accept the	e obligations of section 807.0505 or 617.0503, F.S.
Signature of Registered Agent See attached for	r signed docur	nent	
	REGISTERED AGENT MU	ST SIGN	Date
			
R	nd/or Director (Florida non)		at least 3 directors)
9. Numes and Street Addresses of Each Officer In Titles Name of	nd/or Director (Florida non)	Street Address of E Officer and/or Direct	int least 3 directors) Each cotor City / State / Zip
9. Numes and Street Addresses of Each Officer and Titles Name of Officers and/or Directors Officers and Off	nd/or Director (Florida non)	profit corporations must list a Street Address of E Officer and/or Direc	int least 3 directors) inch ctor City / State / Zip
9. Numes and Street Addresses of Each Officer and Titles Officers and/or Directors CEO Rhonda Keav	eney 73	Street Address of E Officer and/or Direct 339 E. Williams I nit-26496	int least 3 directors) inch ctor City / State / Zip
9. Numes and Street Addresses of Each Officer and Titles Officers and/or Directors CEO Rhonda Keav	eney 73	Street Address of E Officer and/or Direct 339 E. Williams I nit-26496	Drive Scottsdale, AZ 85255
9. Numes and Street Addresses of Each Officer and Titles Name of Officers and/or Directors Officers and Off	eney 73	Street Address of E Officer and/or Direct 339 E. Williams I nit-26496	Drive Scottsdale, AZ 85255
9. Numes and Street Addresses of Each Officer and Titles Officers and/or Directors CEO Rhonda Keav	eney 73	Street Address of E Officer and/or Direct 339 E. Williams I nit-26496	Drive Scottsdale, AZ 85255
9. Names and Street Addresses of Each Officer for Titles Officers and/or Director Rhonda Keav	eney 73	Street Address of E Officer and/or Direct 339 E. Williams I nit-26496	Drive Scottsdale, AZ 85255 JAN 2 2 2021 R. HUNT
9. Numes and Street Addresses of Each Officer for Titles Name of Officers and/or Director Rhonda Keav REINS 10. E-mail Address: 11. I cerufy that I am an officer or director or the receins in the receins of the dissolution, the reason for dissolution is the reason for dissolution.	rhonda8058@	Street Address of E Officer and/or Direct 339 E. Williams I nit 26496	Drive Scottsdale, AZ 85255 Scottsdale, AZ 85255 P. HUNT As provided for in chapter 507 or 517, F.S. 1 hunter certify that when \$ling that all forces the requirements of section 607 0401 or 617 0401 F.S. and that all forces
9. Names and Street Addresses of Each Officer and Titles Officers and/or Director CEO Rhonda Keav REINS 10. E-mail Address: 11. Learly that Lam an officer or director or the rector reinstallement application, the reason for dissolution over by the corporation have been paid. I further	rhonda8058@ siver or trustee empowere to certify, the information income and the certify.	Street Address of E Officer and/or Direct Address of E Officer and/or Direct 339 E. Williams I nit 26496	Drive Scottsdale, AZ 85255 JAN 22 2021 R. HUNT

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT a	acceptable) of the registered agent is:
Name: Registered Agents Inc.	
Address: 7901 4th St N STE 30	0
St. Petersburg FL 3370	02
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name:	
Address:	
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specififiling.)	. (OPTIONAL) ic and cannot be more than five days prior or 90 days after the
Note: If the date inserted in this block does not meet the document's effective date on the Department of Sta	the applicable statutory filing requirements, this date will not be listed as ate's records.
Having been named as registered agent to accept service certificate, I am familiar with and accept the appointme	e of process for the above stated corporation at the place designated in this nt as registered agent and agree to act in this capacity
Bee Hame	12/28/2020
Required Signature/Registere	ed Agent Date
I submit this document and affirm that the facts state document to the Department of State constitutes a third	d herein are true. I am aware that the false information submitted in a
O A N =	12/28/2020
Required Signature/Incorporator	

JAN 22 2021

R. HUNT