PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Katherine Harris **FOR** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS DOCUMENT # 99 NOV 22 AM II: no P98000075084 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA LINS USA ENTERPRISES, INC. Principal Place of Business
2951 South Bayshore Dr. Mailing Address 2951 South Bayshore Dr. Suite 411 Suite 411 Miami, Fl 33133 Miami, Fl 33133 If above addresses are incorrect in any way, line through incorrect information and enter correction below 2 New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified
 To Do Business in Florida
 08/28/1998 801 Brickell Avenue 801 Brickell Avenue Suite Apt #.etc Suite 1420 Suite, Apt. #, etc.
Suite 1420 5. FEI Number Applied For City & State City & State 65-0860793 Not Applicable Miami, F1 Miami, Fl \$8.75 Additional Fee required for a Certificate of Status Country CUUNTRY CERTIFICATE OF STATUS DESIRED 33131 33131 7 Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors Title(s) City / State / Zip _D/P Eduardo Lins 801 Brickell Avenue, Ste. 1420 Mismi, Fl 33131 AS Stephen A. Freeman 520 Brickell Key Dr., Ste. 305 Miami, Fl 33131 0003065291---12/09/99--01051--022 ****750.00 ****750.00 B. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name Stephen A. Freeman Street Address (P.O. Box Number is Not Acceptable) 520 Brickell Key Drive Suite 0-305 Suite, Apt. #, Etc. Miami, Fl 33131 State Zip Code 10 I, being appointed the registered agent of the above pamed corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. This corporation owes the current year (See other side for information on intangible tax.) Intangible Personal Property Tax due June 30. Yes 🔲 12 I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this remistatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath

> 11/16/99 (305) 374-3800 Data Davtime Phone #

SIGNATURE:

Stephen A. Freenan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR