PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1	PLICATION	4	Katherine	IENT OF STATE Harris		*h.s	
PEINSTATEMENT Secretary of State						FILED SEURETARY OF STAT STATES OF CORPORAT	;
DIVISION OF CONFORMATIONS					_	"TISIUN OF CORPORAT	ได้หา
DOCUMENT # P99000106430 1. Corporation Name						01 NOV 27 PM 6: 0	0
SMS SOLUTIONS, INC.					31	00004716953-	
	·					-12/10/010108801 ****758.75 ****758	9 75
1	lace of Business	Mailing Address			1000000		
555 NE 15TH ST. SUITE 100		555 NE 15TH ST. Suite 100					
MIAMI FL 3	3132	32			•	1	
	addresses are incorrect in any way, line thro				וסכוי	COLUMN ()	1
6420	YAW ATE W. U C	New Mailing Office Address, If Applicable			4. Date incorporated of Qualified 12 UV II 12 UV II 15 UV II 15 UV II 17 To Do Business in Florida 01/01/2000		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. FEI Number Applied For		
City & State ET. LAUDERDALE		City & State			65-0967511 Not Applicable 6: \$8.75 Additional Fee required		
Zip 333	Country USA	Zip	Co	ountry	CERTIFICATI	E OF STATUS DESIRED So.75 Additional Fed	
7. Names	and Street Addresses of Each Officer and/ Name of Officers	or Director (Flo	orida nonprofit cor				
Title(s)	and/or Directors	<u> </u>	3	Street Address of Each Officer and/or Director		City / State / Zip	
PSTD	PSTD RODRIGUEZ, SEVERINO		2615 HIATUS ROAD 6420 \$ N.W. 57		TH WAY FT. LAUDERDALE, FC 33309		3309
VD MISCH, ERIC		6420 N.W. 5TH. WAY FT. LAUDERDALE FL 33309					
VD KORHONEN, JAY			2615 HIATUS ROAD COOPER CITY FL 33			COOPER CITY FL 33020 FT LANDERDALE, FL 33	_ [
	ji		16420 1	NJ/V 5 LAF			
		····				FI GUNCAURCE, 1- 31	309
						F) .GUZZACE, 1 - 31.	209
					W-1	Marks	309
						Shorty	309
	8. Name and Address of Current F	Registered Age				Brily	309
	8. Name and Address of Current F	Registered Age		Name	9. Name and /	Address of New Registered Agent	
	EL & UTRERA, P.A.	Registered Age		Name Name Street Address (f	9. Name and A	Address of New Registered Agent Solver Acceptable)	
343 AL		Registered Age		Name Name Street Address (f	9. Name and A	Address of New Registered Agent	CR2E040 (801)
343 AL	EL & UTRERA, P.A. MERIA AVENUE	Registered Age		Name Street Address (F GY20 Suite, Apt. #, Etc.	9. Name and A	Address of New Registered Agent Solve State Zip Code	CR2E040 (8/01)
343 AL CORAL	EL & UTRERA, P.A. MERIA AVENUE		ent	Name Street Address (F GY20 Suite, Apt. #, Etc. City FT. LAN	9. Name and ALPHONE P.O. Box Number N.W. S	Address of New Registered Agent Shot Acceptable) TH - WAY State Zip Code FL 33309	CR2E040 (8/01)
343 AL CORAL	EL & UTRERA, P.A. MERIA AVENUE . GABLES FL 33134		ent	Name Street Address (F GY20 Suite, Apt. #, Etc. City FT. LAN	9. Name and ALPHONE P.O. Box Number N.W. S	Address of New Registered Agent Shot Acceptable) TH - WAY State Zip Code FL 33309	CR2E040 (8/01)
343 AL CORAL	EL & UTRERA, P.A. MERIA AVENUE . GABLES FL 33134 appointed the registered agent of the about		ent	Name Street Address (F GY20 Suite, Apt. #, Etc. City FT. LAN	9. Name and ALPHONE P.O. Box Number N.W. S	Address of New Registered Agent Shot Acceptable) TH - WAY State Zip Code FL 33309	CR2E040 (8/01)
343 AL CORAL	EL & UTRERA, P.A. MERIA AVENUE . GABLES FL 33134 appointed the registered agent of the about		ent	Name Street Address (F GY20 Suite, Apt. #, Etc. City FT. LAN	9. Name and ALPHONE P.O. Box Number N.W. S	Address of New Registered Agent EA is Not Acceptable) TH - WAY State Zip Code FL 33509 ion 607.0505, F.S.	CR2E040 (8/01)
343 AL CORAL 10. I, being Signature of Registered	EL & UTRERA, P.A. MERIA AVENUE GABLES FL 33134 appointed the registered agent of the above Agent SIGIA that I am an officer or director or the receive	ve named corporation of the corp	oration, am familia	Name Street Address (F GY20 Suite, Apt. #, Etc. City Law ar with and accept the of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the co	9. Name and APONEPO. Box Number N. W S	Address of New Registered Agent EA is Not Acceptable) TH - WAY State Zip Code FL 33509 ion 607.0505, F.S.	CR2EGA0 (801)
343 AL CORAL 10. I, being Signature of Registered 11. I certify this rein owed by	EL & UTRERA, P.A. MERIA AVENUE GABLES FL 33134 Jappointed the registered agent of the above Agent SIGN Agent that I am an officer or director or the receivistatement application, the reason for disso	ve named corporation of the corporation is seen that the corporation is se	oration, am familia	Name Street Address (F GY20 Sulte, Apt. #, Etc. City FT. LAU ar with and accept the of cute this application as porporate name satisfies torm do not qualify for	9. Name and ARHOM. P.O. Box Number N. W 5 DERM bligations of Sect corovided for in chat the requirements an exemption un-	Address of New Registered Agent State Zip Code FL 33309 ion 607.0505, F.S. Date 11-20-201 apter 607 or 617, F.S. I further certify that when	CR2EGNO (8/01)
343 AL CORAL 10. I, being Signature of Registered 11. I certify this rein owed by	EL & UTRERA, P.A. MERIA AVENUE GABLES FL 33134 Agent SIGIA that I am an officer or director or he receive statement application, the reason for dissort the corporation have been paid and the new part of the corporation have been paid and the new part of the corporation have been paid and the new part of the corporation have been paid and the new part of the corporation have been paid and the new part of the corporation have been paid and the new part of the corporation have been paid and the new part of the corporation have been paid and the new part of the p	ve named corporation of the corporation is seen that the corporation is se	oration, am familia	Name Street Address (F GY20 Sulte, Apt. #, Etc. City FT. LAU ar with and accept the of cute this application as porporate name satisfies torm do not qualify for	9. Name and ARHOM. P.O. Box Number N. W 5 DERM bligations of Sect corovided for in chat the requirements an exemption un-	Address of New Registered Agent State Zip Code FL 33309 ion 607.0505, F.S. Date 11-20-201 apter 607 or 617, F.S. I further certify that when sof section 607.0401, F.S., that all	CR2EGNO (8/01)
343 AL CORAL 10. I, being Signature of Registered 11. I certify this rein owed by	Agent SIG Agent SIG Agent That I am an officer or director or the receivistatement application, the reason for disso to the corporation have been paid and the napplication is true and accurate, and my sig	ve named corporation of the corporation is seen that the corporation is se	oration, am familia	Name Street Address (F GY20 Sulte, Apt. #, Etc. City FT. LAU ar with and accept the of cute this application as porporate name satisfies torm do not qualify for	9. Name and ARHOM. P.O. Box Number N. W 5 DERM bligations of Sect corovided for in chat the requirements an exemption un-	Address of New Registered Agent State Zip Code FL 33309 is Not Acceptable) TH-WAY State Zip Code FL 33309 ion 607.0505, F.S. Date 11-20-201 apter 607 or 617, F.S. I further certify that when so of section 607.0401, F.S., that all der section 119.07(3)(i), F.S. The information in	CR2EGNO (8/01)