

2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000208156

Entity Name: FARELINE, LLC

Current Principal Place of Business:

13840 N. NORTHSIGHT BLVD
SUITE 109
SCOTTSDALE, AZ 85260-3665

Current Mailing Address:

13840 N. NORTHSIGHT BLVD
SUITE 109
SCOTTSDALE, AZ 85260-3665 US

FEI Number: 46-2963497

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SKYMED INTERNATIONAL (FLORIDA), INC
5137 LAKELAND DR
SUITE 4
LAKELAND, FL 33813 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: JOHN LATIMER

10/18/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LATIMER, JOHN
Address 13840 N. NORTHSIGHT BLVD, SUITE
109
City-State-Zip: SCOTTSDALE AZ 85260-3665

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN LATIMER

VP TRAVEL SERVICES

10/18/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date