PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 JUN 11 AM 6:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F06000006831

1. Corporation Name: ILMA DOV REALTY CORP.

2. Principal Office Address - No P.O. Box #: 577 MAYFAIR DR. South
Suite, Apt. #, etc.:
City & State: BROOKLYN, N.Y.
Zip: 11234 Country: Kings

3. Mailing Office Address: 577 MAYFAIR DR. South.
Suite, Apt. #, etc.:
City & State: BROOKLY N.Y.
Zip: 11234 Country:

CR2E081 (12/08)

4. Date Incorporated or Qualified To Do Business in Florida: 10/16/06

5. FEI Number: 11-3574775 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: ILYA BYKHOVSKY
Street Address (P.O. Box Number is Not Acceptable): 2861 LEONARD DRIVE
Suite, Apt. #, Etc.: F 309
City: AVENTURA State: FL Zip Code: 33160

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Ilya Bykhovsky — REGISTERED AGENT MUST SIGN — Date: 6-03-09

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P.	ILYA BYKHOVSKY	577 MAYFAIR DR. South	BROOKLYN. N.Y. 11234
		500157042785 06/11/09--01055--009 **458.75	
	REINSTATEMENT		
		RH	

10. 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 filing this reinstatement 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 contained in Chapter 119, 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.

SIGNATURE: Ilya Bykhovsky — ILYA BYKHOVSKY — Date: 6-3-09 — Daytime Phone #: (718) 813-4202

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR