

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 500005326715

1. Limited Liability Company's Name

T-REX Boca LLC

500005326715--4

-04/23/02--01064--011

****200.00 ****200.00

2. Principal Office Address

c/o Glazer & Siegel, PLLC

Suite, Apt. #, etc. 5301 Wisconsin Ave,
N.W., Ste. 740

City & State

Washington, D.C.

Zip

20015

Country

USA

3. Mailing Office Address

c/o Glazer & Siegel, PLLC

Suite, Apt. #, etc. 5301 Wisconsin Ave,
N.W., Ste. 740

City & State

Washington, D.C.

Zip

20015

Country

USA

4. State/Country of Formation
Florida, USA

**5. Date Organized or Qualified
To Do Business in Florida**

1/13/00

6. FEI Number

52-2211112

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

NRAI Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)
526 E. Park Avenue

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

**Signature of
Registered Agent**

Ed Hand Ant. Sec.

REGISTERED AGENT MUST SIGN

Date

4/22/02

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	T-REX Boca, Inc.	c/o Glazer & Siegel, PLLC 5301 Wisconsin Ave, NW, #740	Washington, D.C. 20015

REINSTATEMENT 01-02
dec

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of
Managing Member/Manager**

Steven M. Glazer

Date 4/18/02

Daytime Phone # (202) 537-5500

Typed or printed name of signing Managing Member/Manager Steven M. Glazer, Secretary of T-REX Boca, Inc.,

A Delaware Corporation, Managing Member

CR2E041 (9/01)