

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
02 FEB 13 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

L 000000004298

1. Limited Liability Company's Name

ULTRA-TECH VIDEO, LLC

2. Principal Office Address

139 Mohigan Circle

Suite, Apt. #, etc.

City & State

Boca Raton, FL

Zip

33487

Country

USA

3. Mailing Office Address

139 Mohigan Circle

Suite, Apt. #, etc.

City & State

Boca Raton, FL

Zip

33487

Country

USA

4. State/Country of Formation

Florida, USA

5. Date Organized or Qualified
To Do Business in Florida

4-11-2000

6. FEI Number

65-0999989

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

Joseph Moretti

Street Address (P.O. Box Number is Not Acceptable)

139 Mohigan Circle

Suite, Apt. #, Etc.

City

Boca Raton

State

FL

Zip Code

33487

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

REGISTERED AGENT MUST SIGN

Date

2/7/02

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
Pres.	Joseph Moretti	1225 S. Flager Avenue #310	Pompano Beach, FL33060

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

Date

2/7/02

Daytime Phone # 954-946-3409

Typed or printed name of signing Managing Member/Manager

Joseph Moretti

CR2E041 (9/01)