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O'HAIRE, QUINN, CANDLER

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L00000006854

Florida Department of State
Division of Corporations
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LIMITED LIABILITY REINSTATEMENT

KETCHUM-ANDROS, L.L.C.

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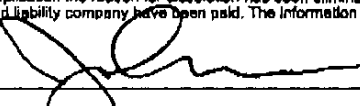
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LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L00000006854 1. Limited Liability Company's Name Ketchum-Andros, L.L.C.			
2. Principal Office Address - No P.O. Box # 4576 South Pebble Bay Circle Suite, Apt. #, etc. City & State Vero Beach, FL Zip Country 32963 U.S.A.		3. Mailing Office Address 4576 South Pebble Bay Circle Suite, Apt. #, etc. City & State Vero Beach, FL Zip Country 32963 U.S.A.	
4. State/Country of Formation Florida, U.S.A.		5. Date Organized or Qualified To Do Business in Florida 06/13/2000	
6. FEI Number 58-2603220		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 Michael O'Haire Street Address (P.O. Box Number is Not Acceptable) 3111 Cardinal Drive Suite, Apt. #, Etc. City State Zip Code Vero Beach FL 32963			
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  Date 01/30/2008 REGISTERED AGENT MUST SIGN			
10. Names and Street Addresses of Managing Members/Managers			
Title	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City / State / Zip
MR	John S. Miller	4576 South Pebble Bay Circle	Vero Beach, FL 32963
REINSTATEMENT 2007, 2008			
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 2/5/08 Daytime Phone # (772) 231-2616	
Typed or printed name of signing Managing Member/Manager John S. Miller			

H08000034394 3