

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

REINSTATEMENT

2001

26 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000010063

1. Limited Liability Company's Name

GROVE MULTIMEDIA, LLC

2. Principal Office Address

3300 SW 27TH AVENUE

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33133

Country

USA

3. Mailing Office Address

601 BRICKELL KEY DRIVE

Suite, Apt. #, etc.

SUITE 805

City & State

MIAMI, FL

Zip

33131

Country

USA

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

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

ALLEN & GALEGO

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

601 BRICKELL KEY DRIVE

Suite, Apt. #, Etc.

SUITE 805

City

MIAMI

State

FL

Zip Code

33131

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

By: Robert N. Allen, Jr., President

Date 10/25/01

REGISTERED AGENT MUST SIGN

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	JACK SINGER, MD	601 BRICKELL KEY DR., #805	MIAMI, FL 33131

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

10/23/01

Daytime Phone # 305-372-3300

Typed or printed name of signing Managing Member/Manager

JACK SINGER, MD

CR2E041 (9/00)