

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

2005 APR 12 P 1:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # L00000013874**

**1. Limited Liability Company's Name**

NG USA, L.L.C.

**2. Principal Office Address**

10201 HAMMOCKS BLVD.

Suite, Apt. #, etc.

UNIT 126

City & State

MIAMI, FL

Zip

33196

Country

USA

**3. Mailing Office Address**

10201 HAMMOCKS BLVD.

Suite, Apt. #, etc.

UNIT 126

City & State

MIAMI, FL

Zip

33196

Country

USA

**4. State/Country of Formation**

FLORIDA/USA

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

01/01/01

**6. FEI Number**

65-1085065

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

HUNG, EDWARD

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

15591 SW 105 TERRACE

Suite, Apt. #, Etc.

APT # 5111

City

MIAMI

State

FL

Zip Code

33196

900053920729  
05/05/05--01052--015 \*\*150.00

**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

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	HUNG, EDWARD	10201 HAMMOCKS BLVD #126	MIAMI, FL 33196
MGRM	HUNG, EDGAR	10201 HAMMOCKS BLVD. #126	MIAMI, FL 33196
MGRM	HUNG, ERASMO	10201 HAMMOCKS BLVD. #126	MIAMI, FL 33196
MGRM	HUNG, ESMER	10201 HAMMOCKS BLVD. #126	MIAMI, FL 33196

**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

14/8/05

Daytime Phone #

14866210924

Typed or printed name of signing Managing Member/Manager

ESMER HUNG

CR2041 (10/02)

NG USA, LLC  
10201 HAMMOCKS BLVD. #126  
MIAMI, FL 33196

April 1, 2005

Division of Corporation  
Registration Section  
P. O. Box 6327  
Tallahassee, FL 32314

Ref: NG USA, LLC – DOC. # L00000013874 – EIN 65-1085065

Gentlemen:

Enclosed please find NG USA, LLC Reinstatement Form and a check for \$100.00 to cover years 2004 and 2005.

We respectfully request to waive the reinstatement penalty. We never received the notice to renew or the notice of cancellation.

Thanks a lot for your attention to this matter.

Yours truly,



Esmer Hung