


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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FILED

2005 OCT 18 PM 3:42

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

600060303446
10/06/05 01053 001

CR2E041 (8/05)

\$300.00

DOCUMENT # L01000000969

1. Limited Liability Company's Name

Prime Time LLC

2. Principal Office Address

2182 N.W. 77th Terrace

Suite, Apt. #, etc.

City & State

Hollywood FL

Zip

33024

Country

U.S.

3. Mailing Office Address

2182 N.W. 77 Terrace

Suite, Apt. #, etc.

City & State

Hollywood FL

Zip

33024

Country

U.S.

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

1/16/2001

6. FEI Number

65-1049691

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

Kurt Menchaca

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

2182 N.W. 77th Terrace

Suite, Apt. #, Etc.

City

Hollywood

State

FL

Zip Code

33024

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 10/17/05

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
MEMBER MANAGER	Kurt Menchaca	2182 N.W. 77th Terrace	Hollywood, FL 33024

10/06/05 01053-001 \$300.00

REINSTATEMENT

2002-05

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 10/17/05

Daytime Phone #

954-983-0706

Typed or printed name of signing Managing Member/Manager

Kurt Menchaca