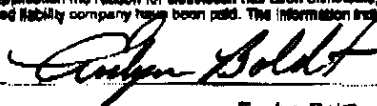


L01000001901

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L010000001901 1. Limited Liability Company's Name Keybolt Associates, LLC			
2. Principal Office Address 2305 C. Whitfield Park Drive Suite, Apt. 6, etc.		3. Mailing Office Address P.O. Box 616 Suite, Apt. 6, etc.	
City & State Sarasota, FL		City & State Tallahassee, FL	
Zip 34243	Country USA	Zip 34270	Country USA
4. State/Country of Formation Florida		5. Date Organized or Qualified To Do Business in Florida February 5, 2001	
6. FEI Number 05-1093692		Applied For ☐ Not Applicable	
7. CERTIFICATE OF STATUS DESIRED ☒			
8. Name and Address of Current Registered Agent			
Name Evelyn G. Boldt			
Street Address (P.O. Box Number is Not Applicable) 614 St. Andrews Drive			
Suite, Apt. 6, etc.			
City Sarasota		State FL	Zip Code 34243
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 606, F.S.			
Signature of Registered Agent 		Date 6/16/03	
REGISTERED AGENT MUST SIGN			
10. Names and Street Addresses of Managing Members/Managers			
Title	Name of Managing Member/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Mr.	Robert Chuckey	2305 C. Whitfield Park Drive	Sarasota, FL 34243
Ms.	Evelyn G. Boldt	2305 C. Whitfield Park Drive	Sarasota, FL 34243
REINSTATEMENT 2002-2003			
11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 606, 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 605.605, F.S., and that all fees owed by the limited liability company have been paid. The information furnished 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 6/12/03 Daytime Phone # 941-756-6533	
Typed or printed name of signing Managing Member/Manager Evelyn Boldt			