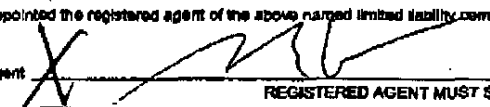


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L01000005710					
1. Limited Liability Company's Name Thomas E. Lamb & Associates, LLC					
2. Principal Office Address 1510 South MacDill Ave.		3. Mailing Office Address 604 Vanderbilt Road		4. State/Country of Formation Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Date Organized or Qualified To Do Business in Florida 04/12/2001	
City & State Tampa, FL		City & State Tampa, FL		6. FEI Number ☐ Applied For ☒ Not Applicable	
Zip 33629	Country USA	Zip 33617	Country USA	7. CERTIFICATE OF STATUS DESIRED ☐	
8. Name and Address of Current Registered Agent					
Name Shea Hughes					
Street Address (P.O. Box Number is Not Acceptable) 604 Vanderbilt Road					
Suite, Apt. #, Etc.					
City Tampa					
State FL					
Zip Code 33617					
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 March 23, 2004	
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	
MGR	Shea Hughes	604 Vanderbilt Road		Tampa, FL 33617	
MGR	Thomas E. Lamb	1510 South MacDill Avenue		Tampa, FL 33629	
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 03/23/04	
Typed or printed name of signing Managing Member/Manager Thomas E. Lamb, Manager				Daytime Phone # 813/629-1478	

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Division of Corporations

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Phone : (813) 223-7474
Fax Number : (813) 229-6553

JTM 018127

LIMITED LIABILITY REINSTATEMENT

THOMAS E. LAMB & ASSOCIATES, LLC

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