

LO1000007176

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 13 AM 9:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # LO1000007176

1. Limited Liability Company's Name

American Family Safety Network, LLC

300023744263
10/13/03--01023--012 **150.00

2. Principal Office Address

2938 BANYAN BLVD CIR NW

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

Zip

33431

Country

3. Mailing Office Address

2938 BANYAN BLVD CIR NW

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

Zip

33431

Country

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

5/8/2001

6. FEI Number

17-9540807

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

CHRISTIAN J. BEZICK

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

2938 BANYAN BLVD CIR NW

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33431

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

Christian J. Bezick

REGISTERED AGENT MUST SIGN

Date 10/9/03

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
MEM	CHRISTIAN J BEZICK	2938 BANYAN BLVD CIR NW	BOCA RATON, FL 33431

REINSTATEMENT 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 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

Christian J. Bezick

Date 10/9/03

Daytime Phone # 561/912-9617

Typed or printed name of signing Managing Member/Manager

CHRISTIAN J. BEZICK

CR2E041 (10/02)