

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LO1000009032

LIMITED LIABILITY COMPANY
REINSTATEMENT
DOCUMENT #

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 2002-2003

1. Limited Liability Company's Name

Mark W. Cross & Co., LLC

LO1000009032

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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2. Principal Office Address 1280 Cypress Way		3. Mailing Office Address 1280 Cypress Way	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Boca Raton		City & State Boca Raton	
Zip 33486	Country USA	Zip 33486	Country USA

4. State/Country of Formation Florida	
5. Date Organized or Qualified To Do Business in Florida 06/05/2001	
6. FEI Number 651110839	Applied For <input type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent

Name
James P. Wilkin, Jr.

Street Address (P.O. Box Number is Not Acceptable)
1280 Cypress Way

Suite, Apt. #, Etc.

City
Boca Raton

State
FL

Zip Code
33486

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
04/14/2003

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	James P. Wilkin, Jr.	1280 Cypress Way	Boca Raton, FL 33486

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 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
04/14/2003

Daytime Phone#
561-368-6004

Typed or printed name of signing Managing Member/Manager
James P. Wilkin, Jr.