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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # LO1000009217					
1. Limited Liability Company's Name Hydro Environment Company, LLC					
2. Principal Office Address 3910 U.S. Highway 301 North			3. Mailing Office Address 3910 U.S. Highway 301 North		
Suite, Apt. #, etc. Suite 180			Suite, Apt. #, etc. Suite 180		
City & State Tampa, FL			City & State Tampa, FL		
Zip 33619	Country USA	Zip 33619	Country USA	4. State/Country of Formation Florida	
				5. Date Organized or Qualified To Do Business in Florida June 8, 2001	
				6. FEI Number 59-3738062	Applied For ☐ Not Applicable ☒
7. CERTIFICATE OF STATUS DESIRED ☒ 1500 words or less required for a Certificate of Status					

8. Name and Address of Current Registered Agent	
Name Leann M. Warfield, Esq.	
Street Address (P.O. Box Number is Not Acceptable) 300 S. Orange Ave.	
Suite, Apt. #, Etc. Suite 1000	
City Orlando	State FL
	Zip Code 32801

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 2/18/03	
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
M	Biological Research Associates, Ltd.	3910 U.S. Highway 301 N, Suite 180	Tampa, FL 33619
M	EcoTech Consultants, Inc.	P O Box 690265	Vero Beach, FL 32969
M	Alberto J. Palombo	P O Box 690265	Vero Beach, FL 32969
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 this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.405, 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 2/17/03	
Typed or printed name of signing Managing Member/Manager Leann M. Warfield		Daytime Phone # (813) 620-4500	

Prepared By: **Leann M. Warfield**
FL Bar #0146196
Shutts & Bowen LLP
300 South Orange Avenue, Suite 1000
Orlando, FL 32801-3373

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Division of Corporations

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LIMITED LIABILITY REINSTATEMENT

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