

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 MAY 18 AM 8:32

DOCUMENT # L0100013565

1. Limited Liability Company's Name  
QUICK QUANTUM, LLC

300054731913  
05/18/05--01026--001 \*\*300.00

2. Principal Office Address  
2255 SE 25 Avenue

3. Mailing Office Address  
2255 SE 25 Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Homestead, FL

City & State  
Homestead, FL

Zip  
33035

Country  
USA

Zip  
33035

Country  
USA

4. State/Country of Formation  
Florida, USA

5. Date Organized or Qualified  
To Do Business in Florida 08/13/01

6. FEI Number

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  
Victor Alfred

Street Address (P.O. Box Number is Not Acceptable)  
138-25 S.W. 88th Street

Suite, Apt. #, Etc.  
#189

City  
Miami

State  
FL

Zip Code  
33186

REINSTATEMENT 02-05

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

REGISTERED AGENT MUST SIGN

Date 05/09/05

**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	Andre Bisasor	2255 SE 25 Avenue	Homestead, FL 33035

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

Andre Bisasor

Date 5-9-05

Daytime Phone # 305-213-9219

Typed or printed name of signing Managing Member/Manager Andre Bisasor

CR2E041 (10/02)