

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

FILED

04 MAR 17 PM 1:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L01000013783

1. Limited Liability Company's Name

VENEREO FINANCIAL SERVICES, LLC

2. Principal Office Address

14700 SUNSET LANE

3. Mailing Office Address

14700 SUNSET LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SOUTHWEST RANCHES, FL

City & State

SOUTHWEST RANCHES, FL

Zip

33330

Country

U.S.A.

Zip

33330

Country

U.S.A.

4. State/Country of Formation

FLORIDA, U.S.A

5. Date Organized or Qualified
To Do Business in Florida

8/14/2001

6. FEI Number

65-1128917

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒ XX

\$300 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

C. ANTHONY RUMORE, ESQ.

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

540 E. McNAB ROAD, Suite C

Suite, Apt. #, Etc.

Suite C

City

POMPANO BEACH

State

FL

Zip Code

33060

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

C.A.T.

REGISTERED AGENT MUST SIGN

Date

3-12-04

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
MGR	MIGUEL VENEREO	14700 Sunset Lane	Southwest Ranches FL, 33330
MGR	SYMBIOS, INC.	540 E. McNab Road, Suite C	Pompano Beach, FL 33060

REINSTATEMENT 2003-2004

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

Miguel Venero

Date

3-12-04

Daytime Phone

(954) 205-7000

Typed or printed name of signing Managing Member/Manager MIGUEL VENEREO, Managing Member