

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **LO1000019751**

1. Limited Liability Company's Name

MOCK & ROLL LLC

2. Principal Office Address - No P.O. Box #

640 Reinante Ave

Suite, Apt. #, etc.

3. Mailing Office Address

640 Reinante Ave

Suite, Apt. #, etc.

City & State

Coral Gables FL

City & State

Coral Gables FL

Zip

33156

Country

US

Zip

33156

Country

US

8. Name and Address of Current Registered Agent

Name **Francisco Villanueva**

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

640 Reinante Ave

Suite, Apt. #, Etc.

City

Coral Gables

State

FL

Zip Code

33156

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

3/14/11

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
Mgmn	Liliana Villanueva	640 Reinante Ave	Coral Gables FL 33156

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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing
Member/Manager

Date

3/14/11

Daytime Phone #

(305) 667-8068

Typed or printed name of signing Managing Member/Manager

Liliana Villanueva

FILED

11 APR -8 AMH:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500198595405
04/08/11--01056--011 **277.50

500198595405
03/18/11--01036--013 **238.75

CR2E041 (1/11)

9-1V

4. State/Country of Formation

US

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

26-0037845

Applied For

☒ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

E-mail Address:

liliana@mockandroll.com

(To be used for future annual report notices)



2 of 2

Miami, 3/14/11

FLORIDA DEPARTMENT OF STATE

Secretary of State

Division of Corporations

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Ref: ***Mock & Roll LLC FEIN# 26-0037845***

Dear Sirs:

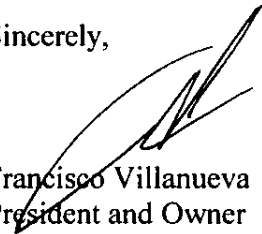
We are hereby enclosing the form to apply for the reinstatement of our business Mock & Roll LLC FEIN# 26-0037845. We tried to do it online but we received a reply stating that "... *it cannot be processed on line, the business entity name listed above is no longer available*".

Our attorney checked this information, and found that the other business with that name is also ours. We have another business named Mock & Roll INC (FEIN# 65-1089440) and both share the same principals as in the corporation.

We kindly ask you to please proceed to allow us to reinstate our business, since some of our bank accounts and other documents are on the name of Mock & Roll LLC as well as Mock & Roll INC.

Of course we understand that we need to pay the fees required and the late fees that are due at this time.

Sincerely,



Francisco Villanueva
President and Owner
SS# 591-192516