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APPROVED
AND
FILED

04 MAY 17 PM 2:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02000009725

1. Limited Liability Company's Name

Innovative Wireless Telecommunications, LLC

500036523805
05/17/04--01081--008 **205.00

2. Principal Office Address

405 Racetrack Rd.

Suite, Apt. #, etc.

Ste. 103

City & State - (F.T.D. 608.008)

Ft. Walton Beach, FL

Zip

32547

Country

USA

3. Mailing Office Address

630C Anchors St. N.W.

Suite, Apt. #, etc.

Ste. 201

City & State

Ft. Walton Beach, FL

Zip

32548

Country

USA

4. State/Country of Formation

Florida/USA

5. Date Organized or Qualified
To Do Business in Florida

04/22/2002

6. FEI Number

03-0375387

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

Frederick W. Thomas

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

127 Gail La Rue

Suite, Apt. #, Etc.

City

Ft. Walton Beach

State

FL

Zip Code

32547

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

05/11/04

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
MGR	Angela Henson	127 Gail La Rue	Ft. Walton Beach, FL 32547

REINSTATEMENT

2003-
2004

5-24-04

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

5/11/04

Daytime Phone #

850-314-0939

Typed or printed name of signing Managing Member/Manager

Angela Henson

CR2E041 (10/02)