PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

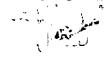
DIVISION OF CORPORATIONS

1. DOCUMENT #

L02000009838

Name and Mailing Address

0006083 01 AT 0.292 **AUTO T4 0 0615 33137-440989 URBANUS TECHNOLOGIES, LLC 89 NE 27TH ST. MIAMI FL 33137-4409



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TALLAHASSEE, FLORIDA



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2. New Mailing Address	4. State/Country of Formation					
City, State, Zip			5. Date Organized or Qualified To Do Business in Florida -04/19/2002		-04/19/2002 - US-	
Principal Place of Business 89 NE 27TH ST.	3. New Principal P	3. New Principal Place of Business Address		6. FEI yurrier Applied Fo		
MIAMI FL 33137	City, State, Zip		7. CERT CATE OF STATUS DESIRED S5.00 Additional Fee requirements for a Certificate of Status			
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent			
FITZGERALD, JOHN E JR 9165 PARK DR. MIAMI SHORES FL 33138			Name Street Address (P.O. Box Number is Not Acceptable)			
		City	City FL Zip Code			
10. I, being appointed the registered agent Signature of Registered Agent	2	EQUIRED	and accept the obligations of		,	
11. Names and Street Addresses of Each N	fanaging Member/Manager					
1110(6)		Street Address of E Managing Member/Ma	*1	City / Stat	e / Zip	
PRESIDEN ANDREW !	(ELLY 8	ig he are	5+ · · · · · · · · · · · · · ·	Miami, F	⁷ L. 33/37	
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	· Andrew	منهم المراكبو				
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12. I. certify that I am managing member/manager of the receiver or trustee empowerer to execute this application as provided for in chapter 608, F.S. I further certify that when filling this reinstalement application the reason for dissolution has been elimited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have hear paid. The introduction is disable to the same legal effect.						
as if made under oath. Signature of Managing Member/Manage	10911	JIRED Date /	DALOB Daytime	305-5 Phone#	-16-9510- ""	
Typed or printed name of signing Managing	Member/Manager) 				