

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**

FLORIDA DEPARTMENT OF REVENUE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

L02000013140

FILED
03 OCT 20 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800024047728
10/23/03--01003--024 **50.00

DOCUMENT # L02000013140

1. Limited Liability Company's Name:
2601 LLC

2. Principal Office Address
1280 South Alhambra Circle

Suite, Apt. #, etc.
Apt. 1210

City & State
Coral Gables, FL

Zip
33134

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip
County

4. State/Country of Formation
Florida

5. Date Organized or Qualified
To Do Business in Florida 5/29/2002

6. FEI Number
20-0302492

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

Corporate Creations Network Inc.

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

941 Fourth Street

Suite, Apt. #, etc.

City

Miami Beach

State
FL

Zip Code
33139

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 10/17/03

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
	Nelson Valdes	1280 South Alhambra Circle Apt. 1210	Coral Gables FL 33134
	Eladio Valdes	1280 South Alhambra Circle Apt. 1210	Coral Gables FL 33134

REINSTATEMENT 2003

BY

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 5/29/2002

Daytime Phone # 305-740-9352

Type or print name of signing Managing Member/Manager Nelson Valdes,
by T. Baez as attorney-in-fact

L020000013140

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

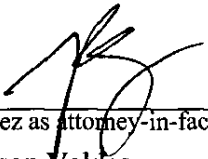
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Re: 2601 LLC

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. 50.00 check payable to Florida Department of State

We never received the Uniform Business Report that should have been mailed to us. Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By: 
by T. Baez as attorney-in-fact

Name: Nelson Valdes

Title: Member

Date: 10/17/03