

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC 17 AM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000018895

1. Limited Liability Company's Name
EKMP, LLC

100025562301
12/17/03--01061--017 **175.00

2. Principal Office Address

2955 Pineda Causeway

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Melbourne, FL

City & State

Zip

32940

Country

USA

Zip

Country

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

7/25/2002

6. FEI Number

☒ 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

D. Gary Potter

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

2955 Pineda Causeway

Suite, Apt. #, Etc.

City

Melbourne

State
FL

Zip Code

32940

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

D. Gary Potter

REGISTERED AGENT MUST SIGN

Date 12/17/2003

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/Mm	Gary Potter	2955 Pineda Causeway	Melbourne, FL 32940

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

D. Gary Potter

Date 12/17/2003

Daytime Phone # 321-254-3199

Typed or printed name of signing Managing Member/Manager

Gary Potter

CR2E041 (10/02)