

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 DEC 12 AM 9:19

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02000019855

1. Limited Liability Company's Name
Bomarc Consulting Group, LLC

2. Principal Office Address 2436 Key Largo Ln Suite, Apt. #, etc.		3. Mailing Office Address 2436 Key Largo Ln Suite, Apt. #, etc.	
City & State Ft. Lauderdale, FL Zip 33312 Country USA		City & State Ft. Lauderdale, FL Zip 33312 Country USA	

CR2E041 (8/05)

4. State/Country of Formation
Florida

5. Date Organized or Qualified To Do Business in Florida 08/05/2002

6. FEI Number 550790240 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: Robert Hopwood

Street Address (P.O. Box Number is Not Acceptable): 2436 Key Largo Ln

Suite, Apt. #, Etc.

City: Ft. Lauderdale State: FL Zip Code: 33312

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: Robert Hopwood Date: 12/3/06

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
Pres.	Robert Hopwood	2436 Key Largo Ln	Ft. Lauderdale, FL 33312

REINSTATEMENT 04-06

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: Robert Hopwood Date: 12/3/06 Daytime Phone #: (954)675-8747

Typed or printed name of signing Managing Member/Manager: Robert Hopwood