

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02000025630

1. Limited Liability Company's Name

INTER ELECTRONICS, LLC

2. Principal Office Address

780 NW LE JEUNE RD

Suite, Apt. #, etc.

SUITE 516

City & State

MIAMI, FL

Zip

33126

Country

USA

3. Mailing Office Address

780 NW LE JEUNE RD

Suite, Apt. #, etc.

SUITE 516

City & State

MIAMI, FL

Zip

33126

Country

USA

4. State/Country of Formation

**5. Date Organized or Qualified
To Do Business in Florida**

6. FEI Number 56-2297271

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

ANTONIO VARGAS

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

780 NW 42 AVENUE

Suite, Apt. #, Etc.

SUITE 516

City

MIAMI,

State
FL

Zip Code
33126

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

[Signature]

REGISTERED AGENT MUST SIGN

Date **3-9-05**

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	MIDENCE, JULIO	1569 ISLAND WAY	WESTON, FL 33326

REINSTATEMENT 03-05

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

[Signature]

Date

3/9/05

Daytime Phone# **305-443-7122**

Typed or printed name of signing Managing Member/Manager

JULIO MIDENCE / mgr

FILED
2005 MAY 16 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2EM1 (10/02)