

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



Secretary of State
DIVISION OF CORPORATIONS

04 AUG 27 PM 3:43

WL 09/17/04

DOCUMENT # L02000026051

1. Limited Liability Company's Name

2002 OCEAN TWO, LLC

REINSTATEMENT 2003-2004

2. Principal Office Address

19115 Collins Avenue

Suite, Apt. #, etc.

#2002

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Sunny Isles Beach, FL 33160

City & State

60

Zip

33160

Country

USA

Zip

Country

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

10/3/2002

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 LOUIS A. SUPRASKI

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

2450 NE Miami Gardens Drive, 2nd Floor

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33180

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

Louis A. Supraski
REGISTERED AGENT MUST SIGN

Date

8/24/04

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
MGRM	Isolda Morell	19115 Collins Ave., #2002	Sunny Isles Beach, FL 33160
MGRM	Daniel Lasser	19115 Collins Ave., #2002	Sunny Isles Beach, FL 33160

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

8/24/04

Daytime Phone #

305-792-0060

Typed or printed name of signing Managing Member/Manager