

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 AUG -5 AM 11:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E041 (12/07)

DOCUMENT # L02000030383

1. Limited Liability Company's Name

RENAISSANCE MANAGEMENT CONSULTING, LLC

2. Principal Office Address - No P.O. Box #

6767 N. Wickham Road

Suite, Apt. #, etc.

Suite 400-A

City & State

Melbourne, Florida

Zip

32940

Country

USA

3. Mailing Office Address

6767 N. Wickham Road

Suite, Apt. #, etc.

Suite 400-A

City & State

Melbourne, Florida

Zip

32940

Country

USA

4. State/Country of Formation

Florida

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

11/13/2002

6. FEI Number

20-0013443

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

GARY B. FRESE, ESQ.

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

930 S. Harbor City Blvd.

Suite, Apt. #, Etc.

Suite 505

City

Melbourne

State

FL

Zip Code

32901

☒ A \$100 reinstatement fee is imposed, except
in circumstances which the entity did not
receive the prior notices. By checking this
box, you are certifying the prior notices were
not received and requesting the \$100
reinstatement be waived.

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08/12/08--01014--008 ***38.75

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 March 5, 2008

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	TUMSER, DAVID	6767 N. Wickham Road Suite 400-A	Melbourne, FL 32940
MGR	POPOVICH, EDWARD	6767 N. Wickham Road Suite 400-A	Melbourne, FL 32940
MGR	LEAHEY, JONATHAN	6767 N. Wickham Road Suite 400-A	Melbourne, FL 32940

03/20/08- 01050-013- #793.75

REINSTATEMENT 2003-2008

without Penalty up 8/5/08

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

David Tumser

Date

3/14/08

Daytime Phone #

321-255-0094

Typed or printed name of signing Managing Member/Manager

David Tumser

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