PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY FLORIDA DEPARTMENT OF STATE Secretary of State								FILED		
3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3					ISION OF CORPORATIONS			09 APR -7 AM 8: 12		
DOCUMENT # L03000027380							SECRETARY OF STATE TALLAHASSEE FLORIDA			
1. Limited Liability Company's Name										
International Consulting & Management Group, LLC							300148549513 04/03/0901004025 **932.50 CRZE041 (10/08)			
laaa a'aa aa aa aa aa aa ah aa ah aa ah aa ah ah					Office Address					
				03 Dorchester Drive iite, Apt. #, etc.			4. State/Country of Formation Florida			
Guid, Apr. #1					O.C.			5. Date Organized or Qualified To Do Business in Florida 07/25/2003		
City & State City & S							6. FEI Number Applied For			
Egg Harbor Twp.		, New Jersey	Egg Harb	or Twp.,	New		-	20-0114651 Not Appli		
08234		USA	08234		USA	•	7. CERTIFICATE	CERTIFICATE OF STATUS DESIRED for a Certificate of Status		
8. Name and Address of Current Registered Agent										
Name Corporation Company of Miami							☐ 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			
Street Address (P.O. Box Number is Not Acceptable) 201 S. Biscayne Boulevard										
Suite, Apt. #, Etc. Suite 1500 (RDB)										
City Miami					State Zip Code FL 33131			reinstatement be waived.		
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 &: Buchhoo								Date 03/31/2009		
REGISTERED AGENT MUST AGN. TISACAS, FLES 18407										
10. Names and Street Addresses of Managing Members/Mar Titles Name of				Street Address of Eac				City / State / Zip		
Managing Members/Managers				Managing Member/Manag			eger			
MgrM	Louis Fr	302 N. Douglas Avenue				Margate, NJ 08402				
MgrM	Ronald (311 N. Douglas Avenue				Margate, NJ 08402				
MgrM	Thomas	303 Dorchester Drive				Egg Harbor Twp., NJ 08234				
EXAMINER					REINSTATEMENT 04-					
									09	
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 Date 03/31/2009 Daytime Phone # 609 - 652 - 6472										
Typed or printed name of signing Managing Member/Manager Thomas Freund										