

1972

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

10 MAR -3 PM 2:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L04000060310

1. Limited Liability Company's Name

EF SMART LLC

800171026768  
03/02/10--01040--004 \*\*138.75

CR2E041 (11/09)

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

4425 CROOKED MILE RD

Suite, Apt. #, etc.

3. Mailing Office Address

907 E. STRAWBRIDGE AVE

Suite, Apt. #, etc.

103B

City & State

MELBOTT ISLAND, FL

City & State

MELBOURNE, FL.

Zip

32952 USA

Zip

32901

Country

USA

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified  
To Do Business in Florida

08/13/2004

6. FEI Number

331108114

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

STEPHEN HALL

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

907 E. STRAWBRIDGE AVE

Suite, Apt. #, Etc.

SUITE 103B

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.

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

*Stephen Hall*

REGISTERED AGENT MUST SIGN

Date 2/24/2010

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
<del>MEMBER</del> MEMBER	STEPHEN HALL	907 E. STRAWBRIDGE AVE. SUITE 103B	MELBOURNE, FL. 32901

JB

REINSTATEMENT 2010

11. E-mail Address: steve.hall@efsmart.com

(To be used for future annual report notifications)

12. 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

*Stephen Hall*

Date 2/24/10

Daytime Phone #

321-536-5379

Typed or printed name of signing Managing Member/Manager STEPHEN HALL

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FILED  
10 MAR -3 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 5, 2010

EF SMART LLC  
4425 CROOKED MILE RD  
MERRITT ISLAND, FL 32952

SUBJECT: EF SMART LLC

Document #: L04000060310

Due to your failure to respond to our letter advising you of your limited liability company not maintaining a registered agent and giving 60 days notice of our intent to administratively dissolve of the above limited liability company, this limited liability company is now dissolved.

A Certificate of Administrative Dissolution is enclosed.

If you have any questions concerning this matter, please call (850) 245-6050.

Carol Mustain  
Regulatory Specialist II  
Division of Corporations

6051

Letter Number: 210A00003083

⊗ Reinstate new application

⊗ 138.75