PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 NOV -8 PM 2:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CR2E041 (8/05)

DOCUMENT # L04000069271

1. Limited Liability Company's Name
UNDERGROUND AUDIO, LLC

2. Principal Office Address	3. Mailing Office Address
3072 CARYS Fort Ln	3072 CARYS Fort Ln
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MARGATE FL	City & State: MARGATE, FL
Zip: 33063 Country: USA	Zip: 33063 Country: USA

4. State/Country of Formation: FLORIDA / USA
5. Date Organized or Qualified To Do Business in Florida: Sept. 23, 2004
6. FEI Number: 34-2018500 ☐ 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 FINK
Street Address (P.O. Box Number is Not Acceptable): 3072 CARYS Fort Ln
Suite, Apt. #, Etc.:
City: MARGATE, FL State: FL Zip Code: 33063

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 Fink Date: 11-07-06
REGISTERED AGENT MUST SIGN

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
VP	MARIA FINK	3072 CARYS Fort Ln	MARGATE FL 33063
			900081519988 11/08/06--01018--007 **205.00
		REINSTATEMENT 05-00	

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: Louis Fink Date: 11-07-06 Daytime Phone #: 954-917-3110

Typed or printed name of signing Managing Member/Manager: LOUIS FINK