PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 NOV 29 AM 10:25

DOCUMENT # L 04000072990

1. Limited Liability Company's Name
Sousa & Diamantino, LLC

CR2E041 (8/05)

2. Principal Office Address	3. Mailing Office Address
15 Palm Harbor Village Way, BArbosa Plaza	15 Palm Harbor Village Way, BArbosa Plaza
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Palm Coast - FL	City & State: Palm Coast - FL
Zip: 32137 Country: USA	Zip: 32137 Country: USA

4. State/Country of Formation: FL

5. Date Organized or Qualified To Do Business in Florida: 10/07/2004

6. FEI Number: ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee Required for Certificate of Status

8. Name and Address of Current Registered Agent

Name: Sousa & Diamantino, LLC

Street Address (P.O. Box Number is Not Acceptable): 15 Palm Harbor Village Way, BArbosa Plaza

200081259892
10/27/06--01007--011 **150.00

Suite, Apt. #, Etc.

City: Palm Coast - FL State: FL Zip Code: 32137

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: x Fernando Diamantino Date: 10/23/2006

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
MGRM	Fernando Diamantino	15 Palm Harbor Village Way, BArbosa Plaza	Palm Coast / FL / 32137
			700082211147 12/01/06--01043--018 **50.00

REINSTATEMENT 2005-06

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: x Fernando Diamantino Date: 10/23/2006 Daytime Phone#: 386-447-38-72

Typed or printed name of signing Managing Member/Manager: Fernando Diamantino