

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

09 MAR 25 PM 3:02

DOCUMENT # L05000119511

1. Limited Liability Company's Name

JRE MORTGAGE BANKERS LLC

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

6073 NW 167 Street

Suite, Apt. #, etc.

C-18

City & State

Miami, FL

Zip

33015

Country

U.S.A

3. Mailing Office Address

6073 NW 167 Street

Suite, Apt. #, etc.

C-18

City & State

Miami, FL

Zip

33015

Country

USA

CR2E041 (10/08)

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

12/15/2005

6. FEI Number

20-3668403

☐ Applied For

☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a Certificate of Status

☐ 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.

8. Name and Address of Current Registered Agent

Name

JUDE ESTAMA

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

6073 NW 167th St.

Suite, Apt. #, Etc.

C-118

City

Miami

State

FL

Zip Code

33015

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 3/9/09

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	JUDE ESTAMA	<u>6073 NW 167 St #C-18</u> <u>Mi</u>	<u>Miami, FL 33015</u>

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 3/9/09

Daytime Phone # 305-820-5972

Typed or printed name of signing Managing Member/Manager

JUDE ESTAMA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 MAR 24 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 18, 2009

JRE MORTGAGE BANKERS LLC
6073 NW 167 ST
C-18
MIAMI, FL 33015

SUBJECT: JRE MORTGAGE BANKERS LLC
Ref. Number: L05000119511

We have received your document for JRE MORTGAGE BANKERS LLC and check(s) totaling \$377.50. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$138.75. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 109A00009234