2062

Florida Department of State
Division of Corporations
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To:
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From:
Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

LIMITED LIABILITY REINSTATEMENT

2300 SOUTH CONGRESS LLC

Certificate of Status	0
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LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M05000006286

1. Limited Liability Company's Name

2300 SOUTH CONGRESS LLC

CR2E041 (10/08)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
6600 North Military Trail	6600 North Military Trail
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Boca Raton, Florida	City & State: Boca Raton, Florida
Zip: 33496 Country: USA	Zip: 33496 Country: USA

4. State/Country of Formation: Delaware

5. Date Organized or Qualified To Do Business In Florida: 11/14/2005

6. FEI Number: 59-3819685 ☐ 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: CORPORATE CREATIONS NETWORK, INC.

Street Address (P.O. Box Number is Not Acceptable): 11380 PROSPERITY FARMS ROAD, #221E

Suite, Apt. #, Etc.:

City: PALM BEACH GARDENS State: FL Zip Code: 33410

☑ 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: Valerie Hawk Valerie Hawk, Special Secretary Date: 2/6/09

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	Office Depot, Inc.	6600 North Military Trail	Boca Raton, Florida 33496

REINSTATEMENT 07-09

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 608.408, 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: Valerie Hawk Date: 2/6/09 Daytime Phone #: 561-694-8107

Typed or printed name of signing Managing Member/Manager: Office Depot, Inc. - MGRM by Valerie Hawk as atty-in-fact