

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

07 AUG 16 AM 10:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Limited Liability Company's Name

WALK & Powder, LLC

200108376472  
08/21/07--01028--019 \*\*150.00

2. Principal Office Address

4504 S. Revellie Dr

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Zip

33611

Country

US

Zip

Country

4. State/Country of Formation

5. Date Organized or Qualified  
To Do Business in Florida

2006

6. FEI Number

☒ Applied For

☐ Not Applicable

7.

CERTIFICATE OF STATUS DESIRED ☐

\$300 Additional Fee required  
for a Certificate of Status

**8. Name and Address of Current Registered Agent**

Name

James E. White Jr

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

4504 S. Revellie Dr

Suite, Apt. #, Etc.

City

Tampa FL 33611

State

FL

Zip Code

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 6-8-07

**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
MEM	James E. white JR	4504 S. Revellie Dr	Tampa, FL 33611

REINSTATEMENT

06-07

*[Signature]*

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

*[Signature]*

Date

6-8-07

Daytime Phone #

813-837-9708

Typed or printed name of signing Managing Member/Manager

James E White Jr