

LU6000107478

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

10 FEB -3 PM 1:54

DOCUMENT #

L06000107478

1. Limited Liability Company's Name

GLOBAL PET HOLDINGS, LLC

PK

000167887700
02/03/10--01009--006 **416.25

CR2E041 (11/09)

2. Principal Office Address - No P.O. Box #
1150 E. Hallandale Beach Blvd.

3. Mailing Office Address
1150 E. Hallandale Beach Blvd.

Suite, Apt. #, etc.
Suite C

Suite, Apt. #, etc.
Suite C

City & State
Hallandale, FL

City & State
Hallandale, FL

Zip
33009

Country
USA

Zip
33009

Country
USA

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida 11/06/2006

6. FEI Number

☒ 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

Atrium Registered Agents, Inc.

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

1500 San Remo Ave.

Suite, Apt. #, Etc.

Suite 125

City

Coral Gables

State
FL

Zip Code
33146

☒ 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

Atrium Registered Agents, Inc.
By: **Jose L. Nunez, VP**

Date **2/2/10**

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
MGR	Isaac Mendal	1150 E. Hallandale Beach Blvd. Suite C	Hallandale, FL 33009

REINSTATEMENT 2007-2010

000167887700
02/03/10--01009--007 **156.25

000167887700
02/03/10--01009--008 **17.50

11. E-mail Address:

(To be used for future annual report notifications)

12. 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 **2/2/10**

Daytime Phone #

Typed or printed name of signing Managing Member/Manager

Isaac Mendal, Manager