

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L09000119325

1. Limited Liability Company's Name

ADS Real Estate Consulting, LLC

2. Principal Office Address - No P.O. Box #
4747 Collins Ave

3. Mailing Office Address
4747 Collins Ave

Suite, Apt. #, etc.

Suite 516

Suite, Apt. #, etc.

Suite 516

City & State

Miami Beach, Florida

City & State

Miami Beach, Florida

Zip

33140

Country

USA

Zip

33140

Country

USA

8. Name and Address of Current Registered Agent

Name
Daron Stein

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

4747 Collins Ave

Suite, Apt. #, Etc.

516

City

MIAMI BEACH

State

FL

Zip Code

33140

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

Date 12/27/2011

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	Ari Spitzer	4747 Collins Ave, Suite 516	Miami Beach, Florida, 33140
MGRM	Baruch Ruttner	4747 Collins Ave, Suite 516	Miami Beach, Florida, 33140
MGRM	Daron Stein	4747 Collins Ave, Suite 516	Miami Beach, Florida, 33140

REINSTATEMENT

10-11

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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing
Member/Manager

Date 12/27/2011

Daytime Phone # 646-660-5223

Typed or printed name of signing Managing Member/Manager Daron Stein

FILED

2011 Dec-28 PM 1:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E041 (1/11)

4. State/Country of Formation

Florida

5. Date Organized or Qualified

To Do Business in Florida **12/16/2009**

6. FEI Number

☐ Applied For

☒ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a Certificate of Status

E-mail Address:

100215595121

12/28/11--01047--001 **382.50

adsrealestateconsulting@gmail.com

(To be used for future annual report notices)