

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 MAR 20 PM 1:31

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L15000083099**

1. Limited Liability Company's Name

Project & Maintenance Engineering, LLC.

500296933195
03/20/17--01015--018 **377.50

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

701 Brickell Avenue

3. Mailing Office Address

Suite, Apt. #, etc.

2000

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Zip

33131

Country

U.S.

Zip

Country

8. Name and Address of Current Registered Agent

Name

Gerardo A. Varquez, P.A.

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

701 Brickell Avenue

Apt. #, Etc.

2000

City

Miami

State

FL

Zip Code

33131

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of Registered Agent

X

REGISTERED AGENT MUST SIGN

Date

3/9/2017

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/Managers	Street Address of Each Authorized Representative/Manager	City / State / Zip
MGR	Francisco J. Lawrence	701 Brickell Ave #200	Miami FL 33131

11. E-mail Address:

frank.lawrence.fme@gmail.com

12. I certify that I am an authorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement of section 605.0012, 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 authorized representative/member

Date

3/9/2017

Daytime Phone #

Typed or printed name of signing authorized representative/member

Handwritten signature and date 3/20/17