L97000000142

LIMITED LIABILITY
COMPANY
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 2001 8:00 A
Secretary of State

DOCUMENT # _L97-142_

1. Limited Liability Company's Name

MEGA LIGHTING LLC 9/29/00

2. Principal Office Address
_3370 NE 190 ST_

Suite, Apt. #, etc.
_1407_

City & State
AVENTURA FL

Zip _33180_   Country _USA_

3. Mailing Office Address
(SAME 2.)

Suite, Apt. #, etc.

City & State

Zip   Country

4. State/Country of Formation
FL/USA

5. Date Organized or Qualified To Do Business in Florida _02/04/1997_

6. FEI Number
_65-0423911_

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 _RICARDO GAJZENBERG_

Street Address (P.O. Box Number is Not Acceptable)
_3370 NE 190 ST_

Suite, Apt. #, Etc. _1407_

City _AVENTURA FL_   State _FL_   Zip Code _33180_

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 _GAJZENBERG GRAIMAN_   Date _04/24/01_

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
	RICARDO GAJZENBERG	3370 NE 190 ST #1407	AVENTURA FL / 33180
	HERMAN MEJIA	4219 MEHLEVGA LN	LAKE WORTH FL / 33461
			000000422025U---- r --05/16/01 --01037--003 ****200.00 ****200.00

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 _GAJZENBERG GRAIMAN_   Date _04/24/01_ Daytime Phone # _761-719 8212_

Typed or printed name of signing Managing Member/Manager _RICARDO GAJZENBERG_

CR2E041 (8/00)