

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L97000000596
**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

FILED

99 DEC -1 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L97000000596

1. Limited Liability Company's Name

INTERNATIONAL GLOBAL MARKETS LLC

REINSTATEMENT 09

2. Principal Office Address
1591 E. Atlantic Blvd.
Pompano Beach, FL 33060

3. Mailing Office Address
1591 E. Atlantic Blvd.
Pompano Beach, FL 33060

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.
Suite 200

4. State/Country of Formation
FLORIDA, USA

5. Date Organized or Qualified
To Do Business in Florida 5/27/1997

City & State
Pompano Beach, FL

City & State
Pompano Beach, FL

6. FEI Number

Applied For
☒ Not Applicable

Zip
33060

Country
USA

Zip
33060

Country
USA

7. CERTIFICATE OF STATUS DESIRED ☒

8. Name and Address of Current Registered Agent

Name
International Company Services (USA) Inc.

Street Address (P.O. Box Number is Not Acceptable)
1591 East Atlantic Blvd.

500003067105-6

Suite, Apt. #, Etc.
Suite 200

-12/10/99-01079-012
****155.00 ****155.00

City
Pompano Beach

State
FL

Zip Code
33060

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

REGISTERED AGENT MUST SIGN

Date Nov. 23, 1999

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	Twenty First Century Services	P.O.Box 107, Duke St.	Grand Turk, Turks & Caicos Islands
MGRM	Cambridge Commodities Limited	P.O. Box 107, Duke St.	Grand Turk, Turks & Caicos Islands

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

Date 11/23/99 Daytime Phone # 954-943-1498

Typed or printed name of signing Managing Member/Manager

Harry Debroskey