

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1062

2001-2002
**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

FILED

02 FEB -6 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L97000001173**

1. Limited Liability Company's Name

EFFECTIVE RECRUITING INTERNATIONAL

2. Principal Office Address

2811 NE. 51st.

Suite, Apt. #, etc.

SUITE 3

City & State

FORT LAUDERDALE FL.

Zip

33308

Country

USA

3. Mailing Office Address

2811 NE. 51st.

Suite, Apt. #, etc.

SUITE 3

City & State

FORT LAUDERDALE FL.

Zip

33308

Country

USA

4. State/Country of Formation

FLORIDA, USA

5. Date Organized or Qualified
To Do Business in Florida

OCT 1997

6. FEI Number **591827473**

Applied For

TX ID #650789452

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

JAMES O'PRAY

600004915426

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

2811 NE. 51st.

-02/13/02--01068--

Suite, Apt. #, Etc.

SUITE #3

*****100.00 ***100.00**

City

FORT LAUDERDALE FL. 33308

State

FL

Zip Code

33308

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

James O'Pray

REGISTERED AGENT MUST SIGN

Date **FEB 5, 2002**

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
PRES	JAMES O'PRAY	2811 NE. 51st.	33308 FORT LAUDERDALE FL
SEC.	JEAN O'PRAY	2811 NE 51st.	FORT LAUDERDALE FL 33308

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

James O'Pray

Date **2/5/02**

Daytime Phone # **954-202-9825**

Typed or printed name of signing Managing Member/Manager

JAMES O'PRAY

Feb 5, 2002

To Whom It may concern:

The Annual Report Fees were sent to the wrong address for the last 2 yrs., therefore, we never received them. We would appreciate the reinstatement fees be forgiven due to the wrong address. Thank you for your consideration. Enclosed is a check for \$100.00 for the last 2 yrs.

Sincerely,
James O'Pray