

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIABILITY
COMPANY
STATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT -9 AM 11:02

DOCUMENT # L98000001979

1. Limited Liability Company's Name

MOSTLY KIDS, LLC

2. Principal Office Address

3439 Hiatus Road

Suite, Apt. #, etc.

City & State

Sunrise, FL

Zip

33311

Country

3. Mailing Office Address

3439 Hiatus Road

Suite, Apt. #, etc.

City & State

Sunrise, FL

Zip

33311

Country

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

9/24/98

6. FEI Number
65-0865084

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

8. Name and Address of Current Registered Agent

Name

Ferdinand & Sullivan, P.A.

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

100 West Cypress Creek Road

Suite, Apt. #, Etc.

Suite 910

City

Fort Lauderdale

State

FL

Zip Code

33309

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

Vita Grosso

REGISTERED AGENT MUST SIGN

Date

9/23/00

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
MGR	Grosso, Vita	3439 Hiatus Road	Sunrise, FL 33309

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

Vita Grosso

Date

9/23

Daytime Phone #

954 746-5541

Typed or printed name of signing Managing Member/Manager