

**LIMITED LIABILITY
COMPANY**

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUL 30 AM 11:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800021522568
07/14/03--01080--004 **150.00

DOCUMENT # L98000002590

1. Limited Liability Company's Name

SUMI ENTERPRISES, LLC

2. Principal Office Address

2500 W. 33RD ST.

Suite, Apt. #, etc.

3. Mailing Office Address

2500 W. 33RD ST.

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

Zip

32839

Country

USA

City & State

ORLANDO, FLORIDA

Zip

32839

Country

USA

4. State/Country of Formation

FLORIDA / ORANGE

5. Date Organized or Qualified
To Do Business in Florida

11/05/98

6. FEI Number

59-3541242

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

SHIRISH DOOLABH

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

8813 SOUTH BAY DRIVE

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32819

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

6/20/03

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	SHIRISH DOOLABH	8813 S. BAY DRIVE	ORLANDO, FL 32819
MGR	HASH DOOLABH	8813 S. BAY DRIVE	ORLANDO, FL 32819

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

[Signature]

Date 6/28/03

Daytime Phone #

407 841 3731

Typed or printed name of signing Managing Member/Manager

SHIRISH DOOLABH

CR2E041 (10/02)

20/2

Sumi Enterprises, LLC
2500 West 33rd Street
Orlando, Florida 32839
Tel. # 407-841-3731

July 7, 2003

Florida Dept. of State
Division of Corporation
409 East Gains Street
Tallahassee, Florida 32399

Re: Document Number **L98000002590**

To whom it may concern,

In the course of a business transaction, it has come to our attention that Sumi Enterprises LLC has been administratively dissolved as of November 5, 2001. As it was explained by your office via telephone a few days ago that the reason for dissolution of the corporation was due to non filing of the annual report for the year 2001.

When our company was registered with your office in November of 1998, we used the register agent's personal address as the mailing address for the company. This was done to secure that all the important correspondences will be received and taken care accordingly. In May of 2000 his personal address changed. The post office was transferring his mail up until November of the same year to the business address, yet we did not receive the annual report.

Due to the above explanation, we are respectfully requesting that the reinstatement penalties be waived. Enclosed you will find a completed and signed reinstatement form and a check for \$150.00 for the annual fees for the years 2001 and 2002 and 2003. We apologize for any inconveniences

Your attention in this matter would be greatly appreciated.

Sincerely yours,


Shirish Doolabh/Mgr.