

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY
COMPANY
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 15 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L98000002928

1. Limited Liability Company's Name

327 Holding Group, L.L.C.

9/29/00

200024019562
10/29/03--01050--012 **300.00

2. Principal Office Address

1755 NE 149th Street

Suite, Apt. #, etc.

3. Mailing Office Address

1755 NE 149th Street

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33181

Country

Zip

33181

Country

4. State/Country of Formation

FL

5. Date Organized or Qualified

To Do Business in Florida 12/1/98

6. FEI Number

22-3647651

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

Gary M. Krasna, P.A.

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

3010 N. Military Trail

Suite, Apt. #, Etc.

Suite 210

City

Boca Raton

State

FL

Zip Code

33431

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 10/9/03

CR2E041 (10/02)

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	Janice Germano	421 West 54th Street	New York, NY 10019

REINSTATEMENT 2000-2003

BK

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

Janice Germano

Date 10/9/03

Daytime Phone # 212-664-1000

Typed or printed name of signing Managing Member/Manager

Janice Germano