| PLEAS | E READ | ALL INSTRUCTIONS BEFORE C | OMPLETING THIS FORM. |
|-------|----------|-------------------------------|----------------------|
| | A DIE SO | ELORIDA DEPARTASSAIT ÓS CRATS | |

| LIMITED LIABILITY COMPANY REINSTATEMENT | Katherii Secretar | TMENT OF STATE ne Harris ry of State corporations | | FILE OI DEC 28 SECRETARY | AM 10: 30 |
|--|-------------------------------|---|--|---------------------------------------|--|
| DOCUMENT # 1. Limited Liability Company's Name JOSK Properties, LLC | 18-344 | 7 | | SECRETARY (TALLAHASSEE | FLORIDA |
| 2. Principal Office Address | 3. Mailing Office Addres | | | | |
| 201 S. Orange Avenue | P.O. Box 1873 | | 4. State/Coun | try of Formation | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 4. State/Country of Formation | | |
| 300 | | | 5. Date Organized or Qualified To Do Business in Florida | | |
| City & State | City & State | City & State | | | |
| Orlando, FL 32801 | Orlando, FL 32802-1873 | | 6. FEI Number Applied For Not Applicable | | |
| Zip Country USA | 32802-1873 | USA | 7. CERTIFICATE | OF STATUS DESIRED | SSOO Additional Recognited for a Certificate of Status |
| | 8. Name and A | ddress of Current Registe | red Agent | | <u></u> |
| Suite, Apt. #, Etc. 300 City Orlando 9. I, being appointed the registered agent of the ab Signature of Registered Agent Registered Agent | | | d accept the obligat | ****150.0 State Zip Code FL 328 | |
| 10. Names and Street Addresses of Managing Me | mbers/Managers | | | | |
| Titles Name of Managing Members/Manag | jers | Street Address of Each Managing Member/Manager | | City / State / Zip | |
| Manager J. Scott Kirk | 201 S. | Orange Avenue | | Orlando, FL | 32801 |
| | | R | EINST | ATEMEN | 100 |
| • | | | | | |
| 11. Cellify that I am managing member/manager of | or the receiver or trustee em | powered to execute this appared the timited liability com | plication as provide | is the requirements of sec | I further certify that when tion 608,406, F.S., and that |
| fling this reinstatement application the reason for all fee wed by the limited liability company have a fair made under oath. | e been paid. The information | indicated on this application | is true and accura | ate, and my signature sha | ll have the same legal effect |
| fling this reinstatement application the reason for all fee wed by the limited liability company have a fair made under oath. | ve been paid. The information | indicated on this application | is true and accura | ate, and my signature sha | Il have the same legal effect |