

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 NOV 16 PM 3:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #**

L99000004256

**1. Limited Liability Company's Name**

Maximo Bait & Tackle, LLC  
3701 50th Avenue S.  
St. Petersburg, FL., 33711

**2. Principal Office Address**

3701 50th Avenue S

Suite, Apt. #, etc.

City & State

St. Petersburg, Fl.,

Zip

33711

Country  
USA

**3. Mailing Office Address**

4801 37th Street S.

Suite, Apt. #, etc.

City & State

St. Petersburg, Fl.,

Zip

33711

Country  
USA

**4. State/Country of Formation**

Florida/Pinellas

**5. Date Organized or Qualified  
To Do Business in Florida**

July 7 1999

**6. FEI Number**

59 3586222

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

Jimmy Aviram

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

3701 50th Avenue S.

Suite, Apt. #, Etc.

City

St. Petersburg,

200004707032--9

-12/06/01--01003--010

\*\*\*155.00 \*\*\*15.00

State

FL

Zip Code

33711

**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

Date 11-19-01

REGISTERED AGENT MUST SIGN

**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	Jimmy Aviram	3701 50th Avenue S.	St. Petersburg, FL., 33711
MGRM	Tal Aviram	3701 50th Avenue S.	St. Petersburg, FL. 33711

REINSTATEMENT

**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 is made under oath.**

Signature of  
Managing Member/Manager

Date 11-19-01

Daytime Phone# (727) 896-9554

Tal Aviram

Typed or printed name of signing Managing Member/Manager

MAXIMO BAIT & TACKLE, LLC.  
3701 50<sup>th</sup> Avenue S.  
St. Petersburg, Fl., 33711  
(727) 866-6553 F(727) 867-3952

November 7, 2001

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL., 32314

Re: Enclosed Reinstatement

To Whom It May Concern:

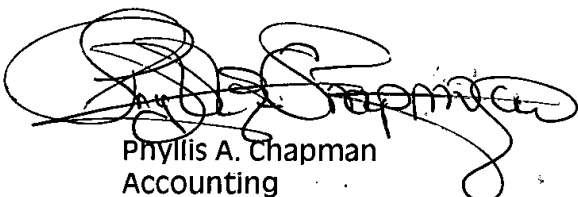
Enclosed with this letter is a request to reinstate the above LLC corporation status. Due to an incorrect address the Annual Filing was never received in this office and has been inactivated by your offices. It has only recently come to our attention that this has occurred and we are now attempting to correct it.

Also, enclosed is a check for \$155.00. If this form and payment is not sufficient to reinstate this corporation please advise me as soon as possible. The phone and fax numbers are above.

We want to take care of this immediately.

Thank you in advance for your help in this matter.

Sincerely,



Phyllis A. Chapman  
Accounting  
Office Manager  
cc/file