

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
JIM SMITH  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 NOV 14 PM 3:47

SECRETARY OF STATE  
420008518384

10/22/02--01080--002 \*\*155.00

DOCUMENT # L99000008044

1. Limited Liability Company's Name

Viscard L.L.C.

2. Principal Office Address

1245 NE 85TH STREET

3. Mailing Office Address

P.O. Box 402984

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami Beach, FL

Zip

33138

Country

USA

Zip

33140

Country

USA

4. State/Country of Formation

Florida, USA

5. Date Organized or Qualified  
To Do Business in Florida

11/99

6. FEI Number

65-0973512

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

Miriam Nunez

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

1245 NE 85th Street

Suite, Apt. #, Etc.

City

Miami

State  
FL

Zip Code  
33138

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 10/15/02

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	Miriam Nunez	1245 NE 85th Street	Miami, FL 33138

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

Date 10/15/02

Daytime Phone# 305-758-3675

Typed or printed name of signing Managing Member/Manager MGR-Miriam Nunez