PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS

01 ... AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L99000008226

REINSTATEMENT 2000-2001

1. Limited Liability Company's Name

HI/LO, LLC

2. Principal Office Address		3. Mailing Office Address	
305 Orange Street		305 Orange Street	
Suite, Apt. #, etc.		Suite, Apt.# etc.	
City & State: Palm Harbor, Florida		City & State: Palm Harbor, Florida	
Zip: 34683	Country: USA	Zip: 34683	Country: USA

4. State/Country of Formation: Florida/USA

5. Date Organized or Qualified To Do Business in Florida: 11/24/1999

6. FEI Number: 59-7167303 — Applied For / Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

8. Name and Address of Current Registered Agent

Name: Ronald S. Deferrari

Street Address (P.O. Box Number is Not Acceptable): 305 Orange Street

Suite, Apt. #, Etc.

City: Palm Harbor State: FL Zip Code: 34683

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] Date: 4/20/2001

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/ Managers	Street Address of Each Managing Member/ Manager	City / State / Zip
MGRM	Ronald S. Deferrari	305 Orange Street	Palm Harbor, FL 34683

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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: 4/20/01 Daytime Phone #: 727-515-5627

Typed or printed name of signing Managing Member/Manager: Ronald S. Defarrari, Managing Member