

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 OCT 30 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY
FLORIDA DEPARTMENT OF STATE
REINSTATEMENT

DOCUMENT # L99000008708

1. Limited Liability Company's Name

NXCSS, L.L.C

2. Principal Office Address

2831 Kingsling Blvd
Suite, Apt. #, etc.
B105

3. Mailing Office Address

2831 Kingsling Blvd
Suite, Apt. #, etc.
B105

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

12/13/1999

6. FEI Number

650984371

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

STEPHEN F. VOIGT

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

2042 BEE RIDGE ROAD

Suite, Apt. #, Etc.

500008701185

10/30/02 01003 004 **200.00

City

SARASOTA

State
FL

Zip Code
34239

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 10/28/02

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
mgr	Kelly Abercrombie	2831 Kingsling B105	SARASOTA FL 34237
mgr	Todd Kolbe	7563 Albert Tillingshast	SARASOTA FL 34240

REINSTATEMENT 2001-02

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 10/28/02

Daytime Phone # 941-362-8855

Typed or printed name of signing Managing Member/Manager

Kelly Abercrombie

CR2041 (9/01)