M00000001478

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 -1 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MJH

DOCUMENT # M00000001478

1. Limited Liability Company's Name

Power Plant Entertainment, LLC

2. Principal Office Address		3. Mailing Office Address	
590 Madison Avenue		590 Madison Avenue	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
32nd Floor		32nd Floor	
City & State		City & State	
New York, NY		New York, NY	
Zip	Country	Zip	Country
10022	USA	10022	USA

4. State/Country of Formation: Delaware

5. Date Organized or Qualified To Do Business In Florida: 7/27/2000

6. FEI Number: 134126554 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ XX $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Fred F. Harris, Esq. c/o Greenberg Traurig, P.A.

Street Address (P.O. Box Number is Not Acceptable): 101 East College Avenue

900004666499--2
-11/06/01--01001--003
****155.00 ****155.00

Suite, Apt. #, Etc.:

City: Tallahassee | State: FL | Zip Code: 32301

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: October 24, 2001

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
MGRM	Native American Development, LLC	The Power Plant 601 E. Pratt St., 6th Flr.	Baltimore, MD 21202
MGRM	Coastal Development LLC	590 Madison Ave., 32nd Flr.	New York, NY 10022
		REINSTATEMENT 2001	

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: 10/30/01 Daytime Phone #: (212) 355-6161

Typed or printed name of signing Managing Member/Manager: Richard Fields

Greenberg Traurig
(Requestor's Name)

(Address)

June; 222-6891
(City, State, Zip) (Phone #)

OFFICE USE ONLY

Courier will wait for Cert. of Status, if possible. If not, please call when ready.

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. POWER PLANT ENTERTAINMENT, LLC M00000001478
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☐ Pick up time _____ ☐ Certified Copy

☐ Mail out ☒ Will wait ☐ Photocopy ☒ Certificate of Status

	NEW FILINGS
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation
X	LLC (Foreign) Reinstatement

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

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DIVISION OF CORPORATIONS

Examiner's Initials

CR2E031(10/92)