

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

10 APR 27 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200163505122
12/10/09--01039--001 **138...

CR2E041 (10/08)

DOCUMENT # MO1000000700

1. Limited Liability Company's Name

VELUM SCIENTIFIC LLC
11555 HERON BAY BLVD #200
CORAL SPRINGS, FL 33076

2. Principal Office Address - No P.O. Box #

11555 HERON BAY BLVD

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

#200

Suite, Apt. #, etc.

City & State

CORAL SPRINGS

City & State

Zip

33076

Country

USA

Zip

Country

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

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

PATRICIA MORALES

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

11555 HERON BAY BLVD #200

Suite, Apt. #, Etc.

CORAL SPRINGS, FL

City

State

FL

Zip Code

33076

☒ A \$100 reinstatement fee is imposed, except
in circumstances which the entity did not
receive the prior notices. By checking this
box, you are certifying the prior notices were
not received and requesting the \$100
reinstatement be waived.

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

PC Morales
REGISTERED AGENT MUST SIGN

Date 10/15/09

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
<u>ITGRM</u>	<u>JUAN CARLOS PIERGO</u>	<u>11555 Heron Bay #200</u> <u>Coral Springs FL 33076</u>	

200163505122
04/28/10 01005-008 **277.50

REINSTATEMENT 08-09

DBRICE

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

PC Morales

Date

10/15/09

Daytime Phone #

954 2943792

Typed or printed name of signing Managing Member/Manager



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2009

VELIUM SCIENTIFIC, L.L.C.
11555 HERON BLVD
SUITE 200
CORAL SPRINGS, FL 33065

SUBJECT: VELIUM SCIENTIFIC, L.L.C.
Ref. Number: M01000000700

We have received your document for VELIUM SCIENTIFIC, L.L.C. and your check(s) totaling \$138.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The total amount due to reinstate without penalty is \$277.50.

There is a balance due of \$138.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 709A00038047

\$ 138.75
138.75

277.50

As per information
received on 4/20/10 the
Total amount
now due
is \$277.50
P/s find check
enclosed