

Tear Here ▲

▲ Tear Here ▲

▲ Tear Here ▲

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

M01000002428

FILED

03 JAN 23 AM 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # M01000002428

Name and Mailing Address

0010129 01 FP 0.352 **PRSRT H6 0 0615 33486-440460

GENESIS MARKETING & PROMOTIONS, LLC

1360 SW 5TH STREET, SUITE 101

BOCA RATON FL 33486-4404



2. New Mailing Address

1360 S.W. 8th Street

BOCA RATON FL 33436

Principal Place of Business

1360 SW 5TH STREET, SUITE 101
BOCA RATON FL 33486

3. New Principal Place of Business Address

SAME AS BEFORE

City, State, Zip

4. State/Country of Formation

CT

5. Date Organized or Qualified
To Do Business in Florida

10/26/2001

6. FEI Number

06-1566117

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

SUTHERLAND, ROHAN
1360 SW 5TH STREET, SUITE 101
BOCA RATON FL 33486

9. Name and Address of New Registered Agent

Name

OLIVER E. JENKINS

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

1360 SW 5th St

City

Boca Raton

FL

Zip Code

33486

10. 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 10-22-02

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	SUTHERLAND, ROHAN	1360 SW 5TH STREET, SUITE 101	BOCA RATON FL 33486
MGR	JENKINS, OLIVER	1360 SW 5th St	Boca Raton, FL 33486
MGR	Ainsley Sutherland	2735 N.W. 73rd Ave	Sunrise FL 33313

This Reinstatement includes payment for only 2002.

The 2003 Uniform Business Report must be filed before May 1, 2003.

REINSTATEMENT 2002

000008639280
10/28/02--01137--014 **100.00

01/03/03 01094 029 50.00

12. 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

Rohan Sutherland

Date 10-22-02

Daytime Phone # 561-394-8192

Typed or printed name of signing Managing Member/Manager

Rohan Sutherland

CR2E094 (8/02)