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**LIMITED LIABILITY REINSTATEMENT  
LD ACQUISITION COMPANY 6 LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
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| Page Count            | 02       |
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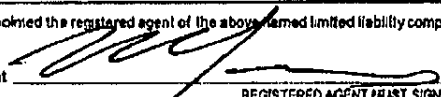
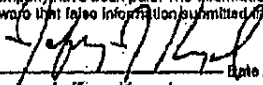
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| LIMITED LIABILITY COMPANY REINSTATEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                           |  |                | FLORIDA DEPARTMENT OF STATE<br>Secretary of State<br>DIVISION OF CORPORATIONS                                                   |                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| DOCUMENT # M12000001868                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                           |                                                                                   |                |                                                                                                                                 |                                                        |
| 1. Limited Liability Company's Name<br>LD Acquisition Company 6 LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                           |                                                                                   |                |                                                                                                                                 |                                                        |
| 2. Principal Office Address - No P.O. Box #<br>2141 Rosecrans Avenue                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                           | 3. Mailing Office Address<br>P.O. Box 3429                                        |                | CR2EM1 (V14)                                                                                                                    |                                                        |
| Suite, Apt. #, etc.<br>Suite 2100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                           | Suite, Apt. #, etc.                                                               |                | 4. State/Country of Formation<br>Delaware                                                                                       |                                                        |
| City & State<br>El Segundo, CA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           | City & State<br>El Segundo, CA                                                    |                | 5. Date Organized or Qualified To Do Business in Florida<br>4/3/2012                                                            |                                                        |
| Zip<br>90245                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Country<br>USA                            | Zip<br>90245                                                                      | Country<br>USA | 6. FEI Number<br>M12000001868                                                                                                   | Applied For<br><input type="checkbox"/> Not Applicable |
| 8. Name and Address of Current Registered Agent<br>Name<br>NRAI Services, Inc.<br>Street Address (P.O. Box Number is Not Acceptable) Suite,<br>1200 South Pine Island Road<br>Apt. #, Etc.<br>City<br>Plantation<br>State<br>FL<br>Zip Code<br>33324                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                           |                                                                                   |                | 7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a certificate of status |                                                        |
| 9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.<br>Signature of Registered Agent  Date 12/7/2015<br>REGISTERED AGENT MUST SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                           |                                                                                   |                |                                                                                                                                 |                                                        |
| 10. Names and Street Addresses of Authorized Representatives/Managers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           |                                                                                   |                |                                                                                                                                 |                                                        |
| Title                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Name of Authorized Representative/Manager | Street Address of Each Authorized Representative/Manager                          |                | City / State / Zip                                                                                                              |                                                        |
| Member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Arthur P. Brazy, Jr.                      | 2141 Rosecrans Ave #2100                                                          |                | El Segundo, CA 90245                                                                                                            |                                                        |
| Member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Jeffrey J. Knyal                          | 2141 Rosecrans Ave #2100                                                          |                | El Segundo, CA 90245                                                                                                            |                                                        |
| Member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | George P. Doyle                           | 2141 Rosecrans Ave #2100                                                          |                | El Segundo, CA 90245                                                                                                            |                                                        |
| Member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Daniel E. Rebeor                          | 2141 Rosecrans Ave #2100                                                          |                | El Segundo, CA 90245                                                                                                            |                                                        |
| Member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Daniel R. Parsons                         | 2141 Rosecrans Ave #2100                                                          |                | El Segundo, CA 90245                                                                                                            |                                                        |
| 11. E-mail Address: ncarey@landmarkdividend.com<br>(To be used for future annual report notifications)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                                                                                   |                |                                                                                                                                 |                                                        |
| 12. I certify that I am an authorized representative/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement of section 605.0012, 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 617.155, F.S.<br>Signature of authorized representative/member  Date 12/4/2015 Daytime Phone # 3102948160<br>Typed or printed name of signing authorized representative/member Jeffrey Knyal |                                           |                                                                                   |                |                                                                                                                                 |                                                        |