

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M16000009164

1. Limited Liability Company's Name
IRON CONTAINER, LLC

400308091524

CR2E041 (1/14)

2. Principal Office Address - No P.O. Box # 3230 NW 42ND STREET		3. Mailing Office Address 3230 NW 42ND STREET		4. State/Country of Formation Delaware				
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
City & State MIAMI, FL		City & State MIAMI, FL		5. Date Organized or Qualified To Do Business in Florida 11/14/2016				
Zip 33142	Country USA	Zip 33142	Country USA	6. FEI Number 81-4198108				
				<table border="1"> <tr> <td>Applied For</td> <td></td> </tr> <tr> <td>Not Applicable</td> <td></td> </tr> </table>	Applied For		Not Applicable	
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 COGENCY GLOBAL INC.			
Street Address (P.O. Box Number is Not Acceptable) 115 NORTH CALHOUN STREET			
Suite, Apt. #, Etc. SUITE 4			
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 605, F.S.

Signature of
Registered Agent

Date 1-18-18

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/Managers	Street Address of Each Authorized Representative/Manager	City / State / Zip
P	John Martorana	3230 NW 42ND STREET	MIAMI, FL 33142
VP, S	Ryan D. Cortner	3230 NW 42ND STREET	MIAMI, FL 33142

11. E-mail Address Ryan@Clearwellgroup.com
(To be used for future annual report notifications)

12. I certify that I am an authorized representative/manager of 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 requirements 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 to the Department of State constitutes a third degree felony as provided in s. 917.155, F.S.

Signature of
Authorized Representative/Manager

Date 1/18/2018

Daytime Phone # 813-435-5600

Typed or printed name of signing Authorized Representative/Manager

Ryan Cortner

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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: 1/19/2018

Account#: I200000000088

Name: Merritt Knickle

Reference #: B097084

Entity Name: IRON CONTAINER, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☒ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

RECEIVED
DEPARTMENT OF STATE
18 JAN 19 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Authorized Amount: \$377.50

Signature: [Signature]

✉ CORPORATE HQ
COGENCY GLOBAL INC.
10 E 40 ST, 10 FL
NY, NY 10016
800.221.0102
+1.212.947.7200

✉ EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES
REGISTRY NO 072
6 BEVIS MARKS, 11 FL
LONDON EC3A 7BA
+44 (0)20.3786.1090

✉ ASIA PACIFIC HQ
COGENCY GLOBAL (HK) LIMITED
A HONG KONG LIMITED COMPANY
INFINITUS PLAZA, 17 FL
199 DES VOEUX RD CENTRAL
HONG KONG
+852.3975.1803



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