APPLICATION FOR 69 REINSTATEMENT FOR LIMITED LIABILITY COMPANY

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State
DIVISION OF CORPORATIONS

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Note and Address of Document # 195000000307   In. Principal Place of Business Address   Soft Funded Strategies, LLC   G/o Winter Brook Holdings, Inc.   Tis Kings Highway Cut - Off   Suite 4000   Inving   TX 75039   Inving	Make Check Payable To: FLORIDA DEPARTMENT OF STATE						TALLAHASSEE, FLORIDA				
September   Sept	1. Name and Mailing Address of Limited Liability Company DOCUMENT # M9500000307										
Skings Highway Cut - Off   Faur Field   CT 06430   Subscience of Business   Skings Highway Cut - Off   Faur Field   CT 06430   Subscience of Business   Skings   Sk	Jeff Funded Strategies, LLC						1a. Principal Place of Business Address				
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7. Name and Address of Current Registered Agent  7. Name and Address of Current Registered Agent  8. Name and Address of New Registered Agent  9. P.C. Tack  9. 1 boing appointed the registered Agent  9. 1 boing appointed the	Suite, Apt. #, etc. Suite, Ap			ot. #, etc.			4. FEI Number			Applied For	
7. Name and Address of Current Registered Agent  Gregory J. Wise  2878 Green Street, Surte 202  Marianna, FL 32447  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Acceptable)  3122 Terry brook Drive # 501  Surent Address (P.O. Box Number is Not Accep	City & State City & S			itate .			75-2505549 Not Applicable				
7. Name and Address of Current Registered Agent  Gregory J. Wise 2878 Green Street, Suite 202 Marianna, FL 32447  Sire Address (P.O. Box Number is Not Acceptable) 3122 Terrybrook Drive # 501  Suite, Apr. 14, 16  P.O. Box 685  City Winter Park FL 32190-0685  9. 1 born 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 Ministry William B. Harrigan  5215 North O'Connor Blad Trving, Tx 75039  MGRM James M. Durkin  5201 North O'Connor Blad Trving, Tx 75039  REINSTATEMENT  11 Locity that I am managing memberimangger or the receiver of fursite empowered to execute this application as provided for in chapter 608, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name satisfies the requirements of section 608 405, F.S. and that all locs owned by the imited liability company name sa	Ζιρ	Country	Zip	<u> </u>	Country	у	5. Date of Last I	Report			
Gregory J. Wise 2878 Green Street, Suite 202 Marianna, FL 32447  Street Address (P.O. Box Number is Not Acceptable) 3122 Terrybrook Drive # 501  Suite, Apr. 8: 68.  P.O. TBox 685  City WinterPark  FL 32790-0685  9. 1. 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. X Alway Always Ston  10. Title Managing Members Managers  Business Street Address  City, State & Zip Code  10. Title Managing Members Managers  Business Street Address  City, State & Zip Code  10. Title Managing Members Managers  MC.RM William B. Harrigan  52.15 North O'Connor Blied Trying, TX 75039  MGRM James M. Durkin  52.01 North O'Connor Blied Trying, TX 75039  REINSTATEMENT  991  Great Managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. in the thing this remarkatement application the reason for dissolution is persone eliminated, the limited liability company name satisfies the requirements of section 604.66, F.S. and that all fees owed by the limited liability company name satisfies the requirements of section 604.66, F.S. and that all fees owed by the limited liability company name satisfies the requirements of section 604.66, F.S. and that all fees owed by the limited liability company name satisfies the requirements of section 604.66, F.S. and that all fees owed by the limited liability company name satisfies the requirements of section 604.66, F.S. and that all fees owed by the limited liability company name satisfies the requirements of section 604.66, F.S. and that all fees owed by the limited liability company name satisfies the requirements of section 604.66, F.S. and that all fees owed by the limited all part of the section 604.66, F.S. and that all fees owed by the limited all part of the section 604.66, F.S. and that all fees owed by the limited all part of the section of the feet of the section of the feet of the section of the	7. N	lame and Address of Curren	Registered Age	···i l		· · · · · · · · · · · · · · · · · · ·	R Name and Add	rece of New Pa		Fee Hequired	
Street Address (P.O. Box Number is Not Acceptable)   Street Address (P.O. Box Number is Not Acceptable)   H 501	Name 1										
Sule, Api, K., sic. P.O. Box 685  Sule, Api, K., sic. P.O. Box 685  Suretrana, FL 33447  Sule, Api, K., sic. P.O. Box 685  Suretrank FL 32790-0685  9. 1. 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 X Accept Managers  Business Street Address  City, State & Zip Code  MC.QM William B. Harrigan  SZIS North O'Connor Blvd Irving, TX 75039  MGRM James M. Durkin  SZOI North O'Connor Blvd Irving, TX 75039  REINSTATEMENT  T. Today  T.	2870 Gran Street Add										
Signature of Registered Agent. X. Adapta. A State of Managing Members Managers. Business Street Address  10. Title: Managing Members Managers. Business Stre	Mariana El 32447										
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Registered Agent X Durkin Problem of North Must sign  10. Trile Managing Members/Managers Business Street Address City. State & Zip Code  10. Trile Managing Members/Managers Business Street Address City. State & Zip Code  10. Trile Managing Members/Managers Business Street Address City. State & Zip Code  10. Trile Managing Members/Managers Business Street Address City. State & Zip Code  10. Trile Managing Members/Managers Business Street Address City. State & Zip Code  10. Trile Managing Members/Managers City. State & Zip Code  10. Trile Managers City. State & Zip Code  10. Trile Managers City. State & Zip Code  10. Trile Managers City. State & Zip Code  10.											
MCCM William B. Harrigan  5215 North O'Connor Blvd  1 Trying, Tx 75039  MGRM James M. Durkin  5201 North O'Connor Blvd  1 Trying, Tx 75039  REINSTATEMENT 9-91  4-10-97  11 Lentify that I am managing member/managing or the receiver or trustee empowered to execute this application as provided for in chapter 608. F.S. Hurther certify that when filing this renstatement 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 these word by the limited liability company have been paid. The inforthation indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath	Signature of Registered Agent X Hours Of Thomas Date 4							17/9	2		
Milliam B. Harrigan  5215 North O'Connor Blvd  Irving, Tx 75039  MGRM James M. Durkin  5201 North O'Connor Blvd  Irving, Tx 75039  REINSTATEMENT 9-91  A. Way  11 Leetify 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 thing 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 flees 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	<b>10.</b> Title	lie Managing Members/Managers			Business Street Address						
Suite 400  REINSTATEMENT 90-97  11 Leerlify 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 thing 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	Marm William B. Harrigan 5				5215 North O'Conn			In////	7070110	ו פכינוםי	
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Typed or printed name of signing Managing Member/Manager