

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JUN 15 PM 2:27

DOCUMENT # M98000000599

1. Limited Liability Company's Name

Wall Street Credit LLC

CR2E041 (8/05)

2. Principal Office Address

9596 Potter Park Drive

Suite, Apt. #, etc.

Suite 200

City & State

Sarasota

Zip

Florida

Country

USA

3. Mailing Office Address

9596 Potter Park Drive

Suite, Apt. #, etc.

Suite 200

City & State

Sarasota

Zip

Florida

Country

USA

4. State/Country of Formation

Florida, USA

5. Date Organized or Qualified
To Do Business in Florida

06/10/1998

6. FEI Number

133973589

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

Steven R. Zoernack

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

9596 Potter Park Drive

Suite, Apt. #, Etc.

Suite 200

City

Sarasota

State

FL

Zip Code

34238

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

REGISTERED AGENT MUST SIGN

Date 06/14/2006

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
Mgr	Steven R. Zoernack	9596 Potter Park Drive	Sarasota FL 34238

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REINSTATEMENT 2003-06

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

Date 06/14/2006

Daytime Phone # 941.918.9005

Typed or printed name of signing Managing Member/Manager

Steven R. Zoernack