

LIMITED LIABILITY
COMPANY
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M99000001102

1. Limited Liability Company's Name

Luria Improvements, LLC

2. Principal Office Address

c/o DLC, 580 White Plains Rd.

Suite, Apt. #, etc.

City & State

Tarrytown, New York

Zip

10591

Country

USA

3. Mailing Office Address

c/o DLC, 580 White Plains Rd.

Suite, Apt. #, etc.

City & State

Tarrytown, New York

Zip

10591

Country

USA

4. State/Country of Formation
Delaware5. Date Organized or Qualified
To Do Business in Florida

7/14/99

6. FEI Number

52-2177330

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

CT Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

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

ANUSHA PUTTY,
VPR & ASST. SEC.

Date

10/29/03

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
MGRM	JIT Package Partners, LLC	580 White Plains Rd.	Tarrytown, New York 10591

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 10/27/03

Daytime Phone #

914 631 3131

of JIT Package Partners, LLC, Manager
of Luria Improvements, LLC

Typed or printed name of signing Managing Member/Manager

Adam Irshin, manager of JIT Package

Partners, LLC, manager of
Luria Improvements, LLC