

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**  
*WBR*



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 JAN 30 PM 12:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # M99000001918

1. Limited Liability Company's Name

BENT BOAT, LLC

100010674861  
01/23/03--01072--009 \*\*50.00

01/30/03 - 01100 001

2. Principal Office Address

4550 Anglers Ave

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

Zip

33312

Country

USA

3. Mailing Office Address

2850 SW Yancy

Suite, Apt. #, etc.

PMB 130

City & State

Seattle, WA

Zip

98126

Country

USA

4. State/Country of Formation

WA

50.00

5. Date Organized or Qualified

To Do Business in Florida 12/06/99

6. FEI Number

911809659

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

Nickie Richter

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

1733 W Las Olas Blvd

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State  
FL

Zip Code  
33312

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 12/09/02

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
Mngr	William Perry	3022 SW Bradford St #402	Seattle, WA 98126
2002			
↓			
2003 VBR			

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

12/10/02

Daytime Phone #

206 933-6400

Typed or printed name of signing Managing Member/Manager

William B. Perry

CR2E041 (9/01)

December 13, 2002

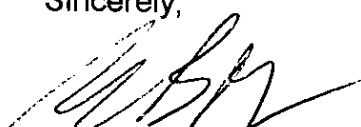
2062  
M99000001918

Florida Department of State  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

I hereby state that Bent Boat, LLC did not received the Limited Liability Company Reinstatement from the Florida Department of State.

Sincerely,

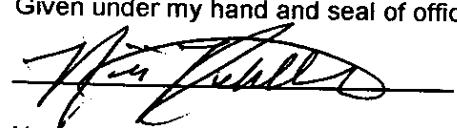
  
William B. Perry  
Manager

STATE OF ~~WASHINGTON~~ FLORIDA

COUNTY OF BROWARD

On this day personally appeared before me William Perry, to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she/they signed the same as his/her/their free and voluntary act and deed, for the uses and purposes therein mentioned.

Given under my hand and seal of office this 13<sup>TH</sup> day of Dec, 2002.

  
Notary Public residing at 1733 W LAS OLAS BLVD  
FT LAUDERDALE, FL 33312

Printed Name: NICKIE RICHTER

My Commission Expires:

6/4/05

