

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

05 JUL -8 AM 10:13

DOCUMENT #

L0200000 4661

1. Limited Liability Company's Name

MIRELLA REALTY LLC

2. Principal Office Address

441 S. Federal Hwy

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Deerfield Beach - FL

City & State

Zip

33441

Country

USA

Zip

Country

4. State/Country of Formation

FL - USA

5. Date Organized or Qualified
To Do Business in Florida

02-26-02

6. FEI Number

72-1521208

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

ILIAS TASSIOPOULOS

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

3365 NE 30th AVE

Suite, Apt. #, Etc.

City

LIGHTHOUSE POINT

State

FL

Zip Code

33064

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 07-07-05

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 |
|--------|--------------------------------------|---|--------------------|
| | ILIAS TASSIOPOULOS | 3365 NE 30 AVE | LHP - FL - 33064 |
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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 07/07/05

Daytime Phone #

954-5964/56x203

Typed or printed name of signing Managing Member/Manager

ILIAS TASSIOPOULOS

CR2E041 (10/02)