

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

1. Limited Liability Company's Name

RRR, LLC

2. Principal Office Address
1608 13th Ave. SouthSuite, Apt. #, etc.
Suite 300City & State
Birmingham, AL

Zip 35205

Country US

3. Mailing Office Address
1608 13th Ave. SouthSuite, Apt. #, etc.
Suite 300City & State
Birmingham, AL

Zip 35205

Country US

4. State/Country of Formation
Florida/US5. Date Organized or Qualified
To Do Business in Florida July 31, 20026. FEI Number
73-1658070Applied For
Not Applicable7. CERTIFICATE OF STATUS DESIRED ☒\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name EDWARD A. HUTCHISON, JR.

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

221 McKenzie Avenue

Suite, Apt. #, Etc.

City Panama City

State FL Zip Code 32401

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

Date 6/18/04

REGISTERED AGENT MUST SIGN

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	Thomas J. and Kathi Rhodes	76 Huntington Road	Atlanta, GA 30309
MGRM	G. Gregory and Alison Richards	780 Amster Green Drive	Dunwoody, GA 30350
MGRM	John H. and Carolanne Roberts	2525 Lanark Road	Birmingham, AL 35223

REINSTATEMENT

2003-2004

300038106593

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 608.408, 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 6/19/04

Daytime Phone# 265-329-4392

Typed or printed name of signing Managing Member/Manager

John H. Roberts

FILED
04 JUN 18 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

2003

GR25041 (1/03)



CORPORATION SERVICE COMPANY

L02000019504

ACCOUNT NO. : 072100000032

REFERENCE : 764152 9138A

AUTHORIZATION

Patricia Perez

COST LIMIT : \$ 205.00

ORDER DATE : June 18, 2004

ORDER TIME : 4:02 PM

ORDER NO. : 764152-005

CUSTOMER NO: 9138A

CUSTOMER: Ms. Amy McGill
Burke, Blue & Hutchison, P.A.
PO Box 70
221 McKenzie Avenue
Panama City, FL 32401

FILED
04 JUN 18 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: RRR, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kelly Courtney - 2916

EXAMINER'S INITIALS _____

RECEIVED
04 JUN 18 PM 4:14
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA