


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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FILED
11 APR 15 PM 2:50
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # L03000048848
 1. Limited Liability Company's Name
Freedom Boat Company, LLC

600201538746
 04/13/11--01002--016 ***932.50
 CR2E041 (1/11)

2. Principal Office Address - No P.O. Box # 1133 South Alhambra Circle		3. Mailing Office Address 1133 South Alhambra Circle	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Coral Gables, FL		City & State Coral Gables, FL	
Zip 33146	Country USA	Zip 33146	Country USA

4. State/Country of Formation Florida	
5. Date Organized or Qualified To Do Business in Florida 12/2/2003	
6. FEI Number 20-3192788	Applied For <input type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent

Name
Moore & Co., P.A.

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

Suite, Apt. #, Etc.
#1100

City Coral Gables	State FL	Zip Code 33134
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E-mail Address:
mdelsol@moore-and-co.com
 (To be used for future annual report notices)

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 *Moore & Co. PA* Date 4/1/2011
 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	Fausto Campuzano	1133 South Alhambra Circle	Coral Gables, FL 33146

JB

REINSTATEMENT 2006-11

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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

Signature of Managing Member/Manager *Fausto Campuzano* Date 4/1/2011 Daytime Phone # 305-343-7785

Typed or printed name of signing Managing Member/Manager Fausto Campuzano, Managing Member



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2011

FREEDOM BOAT COMPANY, LLC
1133 SOUTH ALHAMBRA CIRCLE
CORAL GABLES, FL 33146

SUBJECT: FREEDOM BOAT COMPANY, LLC
Ref. Number: L03000048848

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for FREEDOM BOAT COMPANY, LLC and your check(s) totaling \$932.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Jeraline Saulsberry
Regulatory Specialist II

Letter Number: 711A00008953