

APPLICATION FOR
REINSTATEMENT FOR
LIMITED LIABILITY COMPANY



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

FILED

97 JAN 10 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address
of Limited Liability Company

DOCUMENT #

L93000000411

C. REEF, L.C.
3611 Collins Avenue
Miami Beach, Florida 33140

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.

1a. Principal Place of Business Address

3611 Collins Avenue
Miami Beach, Florida 33140

2 Mailing Address

2a. Principal Place of Business

3. Date Organized or Qualified

3a. State of Formation

11/23/93

Florida

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

☐ Applied For

City & State

City & State

65-0455295

☐ Not Applicable

Zip

Country

Zip

Country

5. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

~~Joel Goldman
Greenberg Traurig
1221 Brickell Avenue, 24 Floor
Miami, Florida 33131~~

Name

Richard J. Giusto

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

1221 Brickell Avenue

Suite, Apt. #, etc.

Suite 2400

City

Miami

Zip Code

FL

33131

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

R. Giusto

Date

1/6/97

REGISTERED AGENT MUST SIGN

10. Title

Managing Members/Managers

Business Street Address

City, State & Zip Code

MEM

Murray, Jean-Jacques

~~6054 Fisher Island Drive~~

c/o Richard J. Giusto
1221 Brickell Avenue
Suite 2400

~~Fisher Island, FL
33109~~
Miami, Florida
33131

REINSTATEMENT 96-97
1/10/97

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

12-30-96

Daytime Phone #

Typed or printed name of signing Managing Member/Manager



THE UNITED STATES
CORPORATION
C O M P A N Y

ACCOUNT NO. : 072100000032

REFERENCE : 216973 4303929

AUTHORIZATION :

Patricia Pizutto

COST LIMIT : \$907.50

ORDER DATE : January 9, 1997

ORDER TIME : 3:21 PM

ORDER NO. : 216973-005

CUSTOMER NO: 4303929

CUSTOMER: Ms. Sheryl C. Vainstein
Greenberg Traurig Hoffman
22nd Floor
1221 Brickell Avenue
Miami, FL 33131-3238

DOMESTIC FILINGS

NAME: C. REEF, L.C.

*See attached
for tracking #*

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY (2)
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kathy Drake

EXAMINER'S INITIALS _____



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 216973 4303929

AUTHORIZATION :

COST LIMIT :

\$ 738,759.0750

ORDER DATE : January 9, 1997

ORDER TIME : 3:21 PM

ORDER NO. : 216973-005

CUSTOMER NO: 4303929

500002053615--2

CUSTOMER: Ms. Sheryl C. Vainstein
Greenberg Traurig Hoffman
22nd Floor
1221 Brickell Avenue
Miami, FL 33131-3238

DOMESTIC FILINGS

NAME: C. REEF, L.C.

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CONTACT PERSON: Kathy Drake

EXAMINER'S INITIALS _____

7 Jan -9 PM 4:13
NON-OP. COMM. DIVISION
FBI-MIA