L03000017280

Betsy Parenti

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LIMITED LIABILITY REINSTATEMENT

12460 EQUINE LANE, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	$155.00

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Steel Hector & Davis LLP
200 South Biscayne Boulevard
Suite 4000
Miami, FL 33131-2398
305.577.7000
305.577.7001 Fax
305.577.4795 Confirmation

Date: October 14, 2004

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Originator: Betsy E. Parenti, Paralegal Originator's Phone No.: 305.577.4795

Message:

Ref. 12460 Equina Lane, LLC / L03000017280

Please find attached the electronic filing cover sheet, revised reinstatement form and your letter of today. We would appreciate your sending us a copy of the certificate of status via fax a soon as it becomes available.

Should you have any questions, or need any additional information, please do not hesitate to call me at (305) 577-4795.

Kind regards.

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LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
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SECRETARY OF STATE
TALLAHASSEE, FL

DOCUMENT # L03000017280

1. Limited Liability Company's Name
12460 EQUINE LANE, LLC

2. Principal Office Address	3. Mailing Office Address
200 s. Biscayne Blvd.	200 S. Biscayne Blvd.
Suite, Apt. #, etc. Suite 4100	Suite, Apt. #, etc. Suite 4100
City & State Miami, Florida	City & State Miami, Florida
Zip 33131 Country U.S.	Zip 33131 Country U.S.

4. State/Country of Formation: Florida
5. Date Organized or Qualified To Do Business in Florida: 05/13/2003
6. FEI Number: ✓ 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: Corporate International Registered Agents, Inc.
Street Address (P.O. Box Number is Not Acceptable): 200 S. Biscayne Boulevard
Suite, Apt. #, Etc.: Suite 4300
City: Miami State: FL Zip Code: 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 _____ Date 10/13/04
REGISTERED AGENT MUST SIGN

CR3E041 (10/02)

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
MBR MGRM	Glasgow Estates Inc.	c/o 200 S. Biscayne Blvd., #4100	Miami, FL 33131

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 608.508, 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.

By: Glasgow Estates, Inc.
By: Phoenix Directors Ltd., Director

Signature of Managing Member/Manager _____ Date 10/13/04 Daytime Phone# 305 577-7017

Typed or printed name of signing Managing Member/Manager: Juan E. Serralles on behalf of Phoenix Directors Ltd., sole Director of Glasgow Estates Inc.