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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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LIMITED LIABILITY COMPANY REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L04000077265

1. Limited Liability Company's Name
SG & AG Investments LLC

2. Principal Office Address
P.O. Box 7501

Suite, Apt. #, etc.

City & State
West Palm Beach, Florida

Zip
33405-7501

Country
U.S.

3. Mailing Office Address
5105 S Flagler Dr

Suite, Apt. #, etc.

City & State
West Palm Beach, Florida

Zip
33405-7501

Country
U.S.

4. State/Country of Formation
Florida

**5. Date Organized or Qualified
To Do Business in Florida** 10/25/2004

6. FEI Number
41-2156459

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
Business Filings Incorporated

Street Address (P.O. Box Number is Not Acceptable)
1203 Governors Square Blvd.

Suite, Apt. #, Etc.
Suite 101

City
Tallahassee

State
FL

Zip Code
32301

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** M. Scott
REGISTERED AGENT MUST SIGN

Date 7/10/06

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
Managing Member	Charles Scott Guerrieri	5105 S Flagler Dr	West Palm Beach, FL 33405-3305

REINSTATEMENT 2005-2006

[Signature]

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** C. Scott Guerrieri **Date** 7-3-06 **Daytime Phone #** 561-236-8246

Typed or printed name of signing Managing Member/Manager Charles Scott Guerrieri, Managing Member

Florida Department of State
Division of Corporations
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LIMITED LIABILITY REINSTATEMENT

SG & AG INVESTMENTS LLC

Certificate of Status	0
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