PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT

2014-2016

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
16 JAN 11 AM 8:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L16000118727

1. Limited Liability Company's Name
Pirate Real Estate, LLC

CR2E041 (1/14)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
1345 Ranchwood Drive	1345 Ranchwood Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Clearwater, Florida	City & State: Clearwater, Florida
Zip: 33764 / Country: USA	Zip: 33764 / Country: USA

4. State/Country of Formation: Pinellas County, Florida

5. Date Organized or Qualified To Do Business in Florida: 11/15/10

6. FEI Number: 27-3987285 ☐ 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: Matthew L. Evans

Street Address (P.O. Box Number is Not Acceptable) Suite,
345 Ranchwood drive

Apt. #, Etc.

City: Clearwater | State: FL | Zip Code: 33764

200280485342
01/14/16--01027--011 **277.50

200280485342
12/30/15--01004--017 **238.75

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of Registered Agent: Matthew L. Evans Date: 12/26/15
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representative/ Manager	City / State / Zip
MNGR	Matthew L. Evans	1345 Ranchwood Drive	Clearwater, Florida 33764

11. E-mail Address: mevens@tampabay.rr.com
(To be used for future annual report notifications)

12. I certify that I am an authorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement of section 605.0012, 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 authorized representative/member: Matthew L. Evans Date: 12/26/15 Daytime Phone #: 7274206158