

APPROVED
AND
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FAX AUDIT NO. H97-000018283

1997 NOV -4 PM 3:54

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SECRETARY OF STATE
DO NOT WRITE IN THIS SPACE
TALLAHASSEE, FLORIDAAPPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONSRead Instructions on Other Side Before Making Entries
Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation. DOCUMENT # H61440

Sebastian Lakes Utility Company
c/o Lennar Partners, Inc.
600 Peachtree Street, N.E., Suite 3500
Atlanta, Georgia 30308

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment

Address
101 MARIETTA STREETAddress
SUITE 3600

City and State

Zip Code
303033. Date incorporated or Qualified
To Do Business in Florida
6/12/19864. FEI Number
59-2880690

FEI Number Applied For

FEI Number Not Applicable

5. \$8.75 Additional Fee required
for a Certificate of StatusCERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and/or Director

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City and State
DP	Hoelzle, Peter	101 Marietta Street Suite 3600	Atlanta, GA 30303
DVT	Boydston, Cory J.	101 Marietta Street Suite 3600	Atlanta, GA 30303
DS	Smith, Lori	101 Marietta Street Suite 3600	Atlanta, GA 30303

REINSTATEMENT '96-'97
SCC 11-4-97

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

C T Corporation System
101 Marietta Street
Suite 3600
Atlanta, GA 30303

8. Name and Address of New Registered Agent and/or Office

Name
CT Corporation System
Street Address (Do NOT Use P.O. Box Number)
1200 S. Pine Island
Street Address (Do NOT Use P.O. Box Number)
City and State
Plantation FL Zip
33324

9. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent See attached Acceptance and Appointment
REGISTERED AGENT MUST SIGN

Date

10. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation 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 Officer or Director Peter Hoelzle, President
Typed or printed name of signing officer or director Peter Hoelzle, President

Date 10/21/97

Daytime Phone # (404) 817-3944

This instrument prepared by:

Brian L. Bilzin, Esq.
RUBIN BAUM LEVIN CONSTANT FRIEDMAN & BILZIN
2500 First Union Financial Center
Miami, Florida 33131-2338
Telephone: 305-374-7450
Florida Bar No. 244252

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11/04/97
10:13 AM

FLORIDA DIVISION OF CORPORATIONS

PUBLIC ACCESS SYSTEM
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((H97000018283 6))

TO: DIVISION OF CORPORATIONS
(850) 922-4000

FAX #:

FROM: RUBIN BAUM LEVIN CONSTANT FRIEDMAN & BILZIN
075350000132

ACCT#:

CONTACT: KENDALL SPARKMAN

PHONE: (305) 374-7580

FAX #:

(305) 350-2446

NAME: SEBASTIAN LAKES UTILITY COMPANY

AUDIT NUMBER.....H97000018283

DOC TYPE.....CORPORATION REINSTATEMENT

CERT. OF STATUS...1

PAGES..... 2

CERT. COPIES.....0

DEL.METHOD.. FAX

EST.CHARGE.. \$923.75

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE
FAX

AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>:

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