

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

02 DEC 12 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L00000001173**

1. Limited Liability Company's Name

FRC 2000, L.L.C.

500009485425
12/12/02--01032--003 **150.00

2. Principal Office Address

536 Biltmore Way

3. Mailing Office Address

536 Biltmore Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Coral Gables, Florida

City & State

Coral Gables, Florida

Zip

33134

Country

U.S.A.

Zip

33134

Country

U.S.A.

4. State/Country of Formation

Florida/Miami-Dade/ U.S.A.

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

65-0977852

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

Andrew Cuevas, Esq.

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

536 Biltmore Way

Suite, Apt. #, Etc.

City

Coral Gables, FL

State

FL

Zip Code

33134

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

Andrew Cuevas

REGISTERED AGENT MUST SIGN

Date

12/10/02

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
MGRM	Reinaldo Olivo	536 Biltmore Way	Coral Gables, FL 33134
MGRM	Fernando Olivo	536 Biltmore Way	Coral Gables, FL 33134
MGRM	Carlos Díaz	536 Biltmore Way	Coral Gables, FL 33134

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

[Signature]

Date 12/02/02

Daytime Phone # (305) 461-9500

Typed or printed name of signing Managing Member/Manager

CR2E041 (9/01)

2062

Andrew Cuevas
Jonathan R. Rubin
Susana Rice Roque

Roberto J. Ortiz
Milton Fuentes

Law Offices
Cuevas & Rubin, P.A.
536 Biltmore Way
Coral Gables, FL 33134

FILED
02 DEC 12
Telephone (305) 461-9500
Telephone (954) 966-0960
Fax (305) 448-7300
E-Mail - cr@cuevas-rubin.com
Web Site: www.cuevas-rubin.com
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

December 9, 2002

Secretary of State
Limited Liability Company
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

RE: Name of Corporation: FRC 2000, L.L.C.

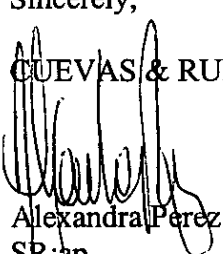
Dear Sir/Madam:

Enclosed please find check no. 11918 for the amount of \$150.00 to renew the company mentioned above and also please find the Limited Liability Reinstatement Form. As per a conversation with an officer from the Secretary of State the late fees will be waived, due to the fact that our office never received the Annual Report.

If you should have any questions, please do not hesitate to contact our office.

Sincerely,

CUEVAS & RUBIN, P.A.


Alexandra Perez
SR:ap
encl.

client-firm\client m-p\olivo fernando\permanent residency file\secretary state-01