

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 JUN 24 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L00000001582**

1. Limited Liability Company's Name

PRINCIPLE DEVELOPMENT GROUP, L.L.C.

2. Principal Office Address

2801 S. NOVA ROAD

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

SOUTH DAYTONA, FL

City & State

Zip

32129

Country

U.S.A.

Zip

Country

4. State/Country of Formation

FLORIDA/U.S.A.

5. Date Organized or Qualified
To Do Business in Florida

2/08/2000

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

DALE MARTIN

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

2801 S. NOVA ROAD

Suite, Apt. #, Etc.

City

SOUTH DAYTONA

State
FL

Zip Code
32129

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

[Signature of Dale Martin]

REGISTERED AGENT MUST SIGN

Date **6/11/02**

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
MGR.	DALE MARTIN	2801 S. NOVA ROAD	SOUTH DAYTONA, FL 32129

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 of Dale Martin]

Date **6/11/02**

Daytime Phone# **(386) 788-0827**

Typed or printed name of signing Managing Member/Manager

DALE MARTIN

CR2E041 (9/01)