

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

DOCUMENT # L00000002407

1. Limited Liability Company's Name

RJS, L.L.C.

2. Principal Office Address

12644 Tamiami Trail, East

3. Mailing Office Address

12644 Tamiami Trail, East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples, FL 34114

City & State

Naples, FL 34114

Zip

34114

Country

Collier

Zip

34114

Country

Collier

4. State/Country of Formation

Collier/Florida

5. Date Organized or Qualified
To Do Business in Florida

3/2/00

6. FEI Number

None

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

Richard D. Yovanovich, Esquire

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

4001 North Tamiami Trail

Suite, Apt. #, Etc.

300

City

Naples

State

FL

Zip Code

34103

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]

Date

7/19/02

REGISTERED AGENT MUST SIGN

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.	Ray H. Smela	12644 Tamiami Trail, East	Naples, Florida 34114

REINSTATEMENT

01-02-02
dec

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

7/19/02

Daytime Phone #

239-775-6010

Typed or printed name of signing Managing Member/Manager

Ray H. Smela