12/23/02 MON 25 FAX 904 4 538 002

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT

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

DOCUMENT # L00000003120

1. Limited Liability Company's Name

FISHING PEN CREEK, L.L.C.

2. Principal Office Address		**3.** Mailing Office Address	
155 EAST 21ST STREET		155 EAST 21ST STREET	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
JACKSONVILLE, FLORIDA		JACKSONVILLE, FLORIDA	
Zip	Country	Zip	Country
32206	USA	32206	USA

4. State/Country of Formation: FLORIDA/USA

5. Date Organized or Qualified To Do Business in Florida: MARCH 20, 2000

6. FEI Number: 59-3634666 ☑ 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: DENNIS D. FRICK

Street Address (P.O. Box Number is Not Acceptable): 155 EAST 21ST STREET

Suite, Apt. #, Etc.:

City: JACKSONVILLE | State: FL | Zip Code: 32206

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: Dennis D. Frick — REGISTERED AGENT MUST SIGN — Date: 12/20/02

CR2E041 (9/01)

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	EDWARD L. BAKER	155 EAST 21ST STREET	JACKSONVILLE, FLORIDA 32206
MGRM	JOHN D. BAKER, II	155 EAST 21ST STREET	JACKSONVILLE, FLORIDA 32206

REINSTATEMENT 2002

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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: Edward L Baker / John D Baker II — Date: 12/20/02 — Daytime Phone #: 355-1781

Typed or printed name of signing Managing Member/Manager: Edward L. Baker & John D. Baker, II

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LIMITED LIABILITY REINSTATEMENT

FISHING PEN CREEK, L.L.C.

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