

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2005 APR -8 P 12:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L000000004175

1. Limited Liability Company's Name

HADLOW HOLDINGS, LLC

2. Principal Office Address

3866 S.W. 30th Ave

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Hollywood, FL

City & State

Zip

33312

Country

USA

Zip

Country

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

4/11/00

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

Rosetta S. Hassel

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

3866 SW 30th Avenue

Suite, Apt. #, Etc.

City

Hollywood

State

FL

Zip Code

33312

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

Rosetta S. Hassel

Date

3/9/05

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
MEM	Louis D. Paolino	3866 S.W. 30th Ave	Hollywood, FL 33312
			100053925831 05/05/05 01066 007 **300.00
			100053925831 05/05/05--01066--008 **50.00

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

LDP

Date

3/9/05

Daytime Phone #

954-585-8713

Typed or printed name of signing Managing Member/Manager

Louis D. Paolino

CR2E041 (10/02)