

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

L00000005755

DIVISION OF CORPORATIONS

02 DEC 26 PM 4:46

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

600009687396

12/26/02--01024--003 \*150.00

1. DOCUMENT # L00000005755

Name and Mailing Address

0003349 01 FP 0.352 \*\*PRSRT TO O 0615 33316-470535

YACHT ONE SERVICES GROUP LLC  
1475 SOUTHEAST 15TH STREET, UNIT #110  
FORT LAUDERDALE FL 33316-4705



12/26 2002

2. New Mailing Address

1401 N.E. 53RD ST. SUITE 111

City, State, Zip  
FORT LAUDERDALE, FL 33334

Principal Place of Business

1475 SOUTHEAST 15TH STREET,  
FORT LAUDERDALE FL 33316

3. New Principal Place of Business Address

UNIT #110

City, State, Zip

4. State/Country of Formation

FL

5. Date Organized or Qualified  
To Do Business in Florida

05/18/2000

6. FEI Number

65-1007959

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

GILBERTSON, STEPHEN  
2200 N.E. 26TH STREET  
WILTON MANORS FL 33305

9. Name and Address of New Registered Agent

Name

WILLIAM L. THOMSON

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

1401 N.E. 53RD ST. SUITE 111

City

FORT LAUDERDALE

FL

Zip Code  
33334

10. 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

W. L. Thomson

REGISTERED AGENT MUST SIGN

Date 12/24/02

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	THOMSON, WILLIAM L	<del>1475 SOUTHEAST 15TH STREET, UNIT #110</del> 1401 N.E. 53RD ST SUITE 111 FORT LAUDERDALE, FL 33334	FORT LAUDERDALE FL 33316

12. 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

W. L. Thomson

Date 12/24/02

Daytime Phone #

954 805-7966

Typed or printed name of signing Managing Member/Manager

CR2E084 (8/02)