

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**

Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L00000007302

1. Limited Liability Company's Name:

Sport East LC

10/4/02

500029750635
03/03/04--01021--026 **100.00

FILED
FEB 19 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Office Address
1897 Palm Beach Lakes Boulevard

3. Mailing Office Address

4. State/Country of Formation
Florida

Suite, Apt, #, etc.
Suite 226

Suite, Apt, #, etc.

5. Date Organized or Qualified
To Do Business in Florida 6/20/2000

City & State
West Palm Beach, FL

City & State

6. FEI Number

☒ Applied For
☐ Not Applicable

Zip
33409

County

Zip

County

7.
CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Warner & Associates CPA, P.A.

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

1897 Palm Beach Lakes Boulevard

Suite, Apt. #, etc.
Suite 226

City

West Palm Beach

State

FL

Zip Code

33409

500029750635
03/03/04--01021--027 **55.00

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

E. Davila

Date 2/18/04

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

Manager

Enes Trnovcevic

1897 Palm Beach Lakes Boulevard Suite 226

West Palm Beach FL 33409

REINSTATEMENT 2002-2004

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

E. Davila

Date 12/18/2004

Daytime Phone # 305-619-6666

Type or print name of signing Managing Member/Manager
Enes Trnovcevic, Manager
by E.S. Davila as attorney-in-fact

L00000007302

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Sport East LC

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. \$100.00 check payable to Florida Department of State

We never received the Uniform Business Report for the following year(s) that should have been mailed to us:

2002 and 2003

Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By: E.S. Davila
by E.S. Davila as attorney-in-fact

Name: Enes Trnovcevic

Title: Manager

Date: 12/18/04