PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

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

FILED
02 FEB 21 AM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000068872

1. Limited Liability Company's Name

TKK Sea Side, LLC

200005023452--3
-02/27/02--01023--016
****100.00 *****50.00

2. Principal Office Address	**3.** Mailing Office Address
1200 S. Swinton Avenue	1200 S. Swinton Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Delray Beach, FL	City & State: Delray Beach, FL
Zip: 33444 Country: Palm Beach	Zip: 33444 Country: Palm Beach

4. State/Country of Formation: Florida

5. Date Organized or Qualified To Do Business in Florida: May 15, 2000

6. FEI Number: 65-1030577 ☐ 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 B. Klein

200005023452--3
-02/27/02--01023--018
****155.00 ****155.00

Street Address (P.O. Box Number is Not Acceptable): 1200 S. Swinton Avenue

Suite, Apt. #, Etc.:

City: Delray Beach, FL State: FL Zip Code: 33444

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: Richard B. Klein Date: 2/5/02
REGISTERED AGENT MUST SIGN

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	Richard B. Klein	1200 S. Swinton Ave	Delray Beach, FL 33444

REINSTATEMENT 01-02

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: Richard B. Klein Date: 2/5/02 Daytime Phone #: 561/239.6155

Typed or printed name of signing Managing Member/Manager: RICHARD B. KLEIN