

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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 MAY -8 PM 1:12

10/2  
w/ 5/24

DOCUMENT # L00000009225

**1. Limited Liability Company's Name**

CABLEBoarding, L.L.C.

**REINSTATEMENT**

**2. Principal Office Address**

3691 Lone Pine Road

Suite, Apt. #, etc.

City & State

Delray Beach, FL

Zip

33445

Country

USA

**3. Mailing Office Address**

3691 Lone Pine Road

Suite, Apt. #, etc.

City & State

Delray Beach, FL

Zip

33445

Country

USA

**4. State/Country of Formation**

Florida

**5. Date Organized or Qualified  
To Do Business in Florida**

July 25, 2000

**6. FEI Number**

Applied For

☒ Not Applicable

**7. CERTIFICATE OF STATUS DESIRED** ☒

\$5.00 Additional Fee required  
for a Certificate of Status

900005638729--41  
-05/30/02--01007--022  
\*\*\*\*205.00 \*\*\*\*205.00

**8. Name and Address of Current Registered Agent**

Name

Robert B. Federspiel

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

3691 Lone Pine Road

Suite, Apt. #, Etc.

City

Delray Beach

State

FL

Zip Code

33445

**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

*Robert B. Federspiel*

REGISTERED AGENT MUST SIGN

Date

4/29/02

**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	Robert B. Federspiel	3691 Lone Pine Road	Delray Beach, FL 33445
Manager	Peter Troup	1117 Island Drive	Delray Beach, FL 33483

**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

*Robert B. Federspiel*

Date

4/29/02

Daytime Phone #

561-272-5878

Typed or printed name of signing Managing Member/Manager

ROBERT B. FEDERSPIEL

CR2E041 (9/01)

2 of 2

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**SPINNER DITTMAN FEDERSPIEL & DOWLING LLP**  
**ATTORNEYS AT LAW**

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ROBERT A. DITTMAN, P.A.<sup>1</sup>  
DONALD C. DOWLING<sup>2</sup>  
ROBERT W. FEDERSPIEL, P.A.  
\_\_\_\_\_  
JOHN W. SPINNER (1927-1998)

151 N.W. FIRST AVENUE  
DELRAY BEACH, FLORIDA 33444  
\_\_\_\_\_  
TELEPHONE (561) 276-2900  
FACSIMILE (561) 276-5489

<sup>1</sup> ALSO ADMITTED IN OHIO AND COLORADO  
<sup>2</sup> ALSO ADMITTED IN NEW YORK AND ILLINOIS  
FAMILY LAW AND CIRCUIT COURT  
MEDIATOR AND ARBITRATOR

May 2, 2002

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Limited Liability Company Reinstatement

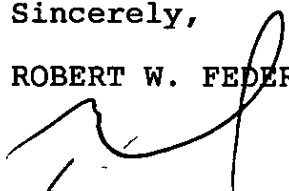
Gentlemen:

Enclosed for filing please find a reinstatement form for CABLEBoarding, L.L.C. As well, enclosed please find my check in the amount of \$205.00 representing the \$100.00 reinstatement fee, \$100.00 annual report fee for the past two years, and the \$5.00 certificate of status fee. Please forward the certificate of status to my office at the address listed above.

Thank you for your assistance in this matter.

Sincerely,

ROBERT W. FEDERSPIEL, P.A.



Robert W. Federspiel

RWF:kp  
Enc.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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