

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L00000009889

LIMITED LIABILITY COMPANY
HARRIS
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 MAY -7 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000009889

1. Limited Liability Company's Name

Peddiestone, LLC

2. Principal Office Address

2722 Apalachee Parkway

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Zip

32301

Country

USA

Zip

Country

4. State/Country of Formation

FL, USA

5. Date Organized or Qualified
To Do Business in Florida

8-17-00

6. FEI Number

59-3667246

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$300 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Lynette Groschere

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

2722 Apalachee Parkway

Suite, Apt. #, Etc.

700018445337

05/07/03-01026-001 **200.00

City

Tall

State

FL

Zip Code

32301

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

Lynette Groschere

REGISTERED AGENT MUST SIGN

Date

5/6/03

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
MEMBER	Lynette Groschere	3217 Shimmly Lane	Tallahassee FL 32308

REINSTATEMENT

02-03
dec

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

Lynette Groschere

Date

5/6/03

Daytime Phone #

850 251 2478

Typed or printed name of signing Managing Member/Manager