

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

FILED

01 DEC 17 PM 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000010006

1. Limited Liability Company's Name

BUDDHA, LLC

2. Principal Office Address

3000 N. Ocean Drive

Suite, Apt. #, etc.

Suite 37F

City & State

Singer Island, FL

Zip

33404

Country

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip

Country

4. State/Country of Formation

FLORIDA

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

8/18/2000

6. FEI Number

☒ 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

Michael S. Singer, Esq.

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

3801 PGA Boulevard, Suite 802

Suite, Apt. #, Etc.

City

Palm Beach Gardens, Florida

State

FL

Zip Code

33410

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**

REGISTERED AGENT MUST SIGN

Date

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
M	Carl Presto	3000 N. Ocean Drive, #37F	Singer Island, FL 33404
M	Denise Presto	3000 N. Ocean Drive, #37F	Singer Island, FL 33404

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**

Date 12-01-01

Daytime Phone # 904-707-4999

Typed or printed name of signing Managing Member/Manager

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CARL AND DENISE PRESTO
3000 N. OCEAN DRIVE, #37F
SINGER ISLAND, FLORIDA 33404

November 16, 2001

Department of State
Registration Section
P.O. Box 6327
Tallahassee, Florida 32314

Re: Buddha, LLC and Stashu, LLC

Dear Sir or Madam:

Please be advised that I received a Notice of Dissolution for the above-referenced LLCs. This is the first mail I have received from your office. I never received my annual reports or any notices that these LLCs were being dissolved. I still receive mail at the address listed for the limited liability companies and I did not receive anything from you except the Notice of Dissolutions.

Pursuant to instructions from your office, I have enclosed my check in the amount of \$100.00 representing the filing fees for the LLCs annual reports. Please note that I do want to change my address at this time to the address listed on the reinstatement forms. Please reinstate these LLCs at your earliest convenience. Thank you.

Sincerely,


CARL PRESTO

Enclosures as Stated