

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 OCT 22 PH 2:57

DOCUMENT # L00000010266

1. Limited Liability Company's Name

Metro Area Properties, LLC

REINSTATEMENT 2002

700008526847
10/22/02--01128--001 **160.00

2. Principal Office Address

311 E Robertson Ave

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Brandon FL

City & State

Zip
33511

Country
USA

Zip

Country

4. State/Country of Formation

FL/USA

5. Date Organized or Qualified
To Do Business in Florida

8/00

6. FEI Number

59 3729263

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

Larry Chadwell Jr.

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

311 E Robertson St.

Suite, Apt. #, Etc.

City

Brandon

State
FL

Zip Code

33511

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

Larry Chadwell Jr.

REGISTERED AGENT MUST SIGN

Date 10-22-02

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
MGRM	Larry Chadwell SR	311 E Robertson St	Brandon, FL 33511
MGRM	Larry Chadwell JR	311 E Robertson St	Brandon, FL 33511
MGRM	Chris Swenson	311 E Robertson St	Brandon, FL 33511

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

Larry Chadwell Jr.

Date 10-22-02

Daytime Phone # 813-657-5394

Typed or printed name of signing Managing Member/Manager

Larry Chadwell Jr.

CR2E041 (9/01)