PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L00000010546

1. Limited Liability Company's Name
GLANZ REAL ESTATE HOLDINGS, LLC

03

700060913497

CR2E041 (8/05)

2. Principal Office Address	3. Mailing Office Address
1905 Clint Moore Road	1905 Clint Moore Road
Suite, Apt. #, etc.: Suite 103	Suite, Apt. #, etc.: Suite 103
City & State: Boca Raton, FL	City & State: Boca Raton, FL
Zip: 33496 County: US	Zip: 33496 Country: US

4. State/Country of Formation: Florida

5. Date Organized or Qualified To Do Business in Florida: 10/31/2000

6. FEI Number: 65-1042942 ☐ 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: NRAI Services, Inc.

Street Address (P.O. Box Number is Not Acceptable): 2731 Executive Park Drive

Suite, Apt. #, Etc: Suite 4

City: Weston State: FL Zip Code: 33331

9. I being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of Registered Agent: Mary Pars
REGISTERED AGENT MUST SIGN

Date:

10. Names and Street Addresses of Managing Members/Managers

Titles	Names of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Steven Glanz	1905 Clint Moore Road Suite 103	Boca Raton, FL 33496

REINSTATEMENT 2003-2005

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 605.0108, 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: [signature] Date: 10/20/05 Daytime Phone: (561) 444-7[illegible]

Typed or printed name of signing Managing Member/Manager: Steven Glanz

L05000010546

FLORIDA FILING & SEARCH SERVICES, INC.
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1333 N. DUVAL STREET, TALLAHASSEE, FL 32303
PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 10-25-05

NAME: glanz real estate holdings, llc

TYPE OF FILING: **REINSTATEMENT**

COST: **$250 + $30= $280**

RETURN: **CERTIFIED COPY**

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AUTHORIZATION: **ABBIE/PAUL HODGE**