

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

01 DEC 17 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L00000010923**

1. Limited Liability Company's Name

DANIEL A Korey & Assoc, L.C.

2. Principal Office Address

9468 EL Clair Ranch Rd.

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Boynton Beach Fla.

City & State

Zip Country

33437 Palm Beach

Zip Country

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

Sept. 8th 2000

6. FEI Number

65-1033399

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

**\$9.00 Additional Fee required
for a Certificate of Status**

8. Name and Address of Current Registered Agent

Name

DANIEL A. Korey

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

9468 EL Clair Ranch Rd.

Suite, Apt. #, Etc.

500004739715-8

-12/26/01--01091--014

******150.00 ****150.00**

City

Boynton Beach

State

FL

Zip Code

33437

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

Daniel A. Korey

Date **11/15/01**

REGISTERED AGENT MUST SIGN

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

**MANAGING
MEMBER**

DANIEL A. Korey

9468 EL Clair Ranch Rd

Boynton Beach Fla. 33437

REINSTATEMENT

**01
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

Daniel A. Korey

Date **11/15/01**

Daytime Phone # **561-733-1182**

Typed or printed name of signing Managing Member/Manager

DANIEL A. Korey

CR2041 (9/01)