

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2004 OCT 13 P 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000013857

1. Limited Liability Company's Name

PRINCETON FLORIDA ASSOCIATES, LLC

2. Principal Office Address

820 MORRIS TURNPIKE

Suite, Apt. #, etc.

City & State

SHORT HILLS, NJ

Zip

07078

Country

USA

3. Mailing Office Address

4714 CROSSWIND CT

Suite, Apt. #, etc.

City & State

WEST MELBOURNE, FL

Zip

32904

Country

USA

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified

To Do Business in Florida 11/9/2000

6. FEI Number

58-2588036

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

DAVID KIPPER

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

19061 OUTRIGGER LANE

Suite, Apt. #, Etc.

City

JUPITER

State

FL

Zip Code

33458

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

David Kipper

REGISTERED AGENT MUST SIGN

Date

10/08/04

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	LEONARD WILF	820 MORRIS TURNPIKE	SHORT HILLS, NJ 07078

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

Leonard Wilf

Date

10/08/04

Daytime Phone #

800-354-6825 (X)
108

Typed or printed name of signing Managing Member/Manager

LEONARD WILF

CR2E041 (10/02)