

03/16/2003 18:42 5617783261

PLEASE AIR OF 18

PAGE 02

L00000015121PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM **LED****LIMITED LIABILITY
COMPANY
REINSTATEMENT****FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS****DOCUMENT # L00000015121**

1. Limited Liability Company's Name

Cheisea's on Cardinal, LLC

**03 MAR 19 AM 7:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

500013984085 \$255.00

03/12/03 01022 017

2. Principal Office Address

3201 Cardinal Drive

3. Mailing Office Address

3201 Cardinal Drive

Buss. Apt. #, etc.

Buss. Apt. #, etc.

4. Base/Country of Formation
Florida5. Date Organized or Qualified
To Do Business in Florida **12-2000**6. FR Number **65-1068883**Applied / or
Not Applicable

City & State

Vero Beach, FL

City & State

Vero Beach, FL

Zip

32963

Country

USA

Zip

32963

Country

USA

7. CERTIFICATE OF STATUS DESIRED ☒

8. Name and Address of Current Registered Agent

Name

Susan Scanlon Buckley

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

3201 Cardinal Drive

Buss. Apt. #, etc.

City

Vero Beach

State
FLZip Code
32963

9. I am appointing the registered agent of the above named limited liability company, and I am familiar with and accept the provisions of Chapter 608, F.S.

Signature of
Registered Agent*Susan Scanlon Buckley*

REGISTERED AGENT MUST SIGN

Date **3-11-03**

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Susan Scanlon Buckley	3201 Cardinal Drive	Vero Beach, FL 32963

REINSTATEMENT 2001-2003*(MS)*

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 605.009, F.S., and that all fees owed by the limited liability company have been paid. The information included 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*Susan Scanlon Buckley*Date **3-18-03**Daytime Phone # **772-234-2300**

Typed or printed name of signing Managing Member/Manager

Susan Scanlon Buckley