

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000015281

1. Limited Liability Company's Name

Novarini Properties LLC

2. Principal Office Address

3. Mailing Office Address

902 Hollywood Blvd.

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

N/A

N/A

City & State

City & State

Hollywood, FL

Same

Zip

Country

Zip

Country

33019

USA

Same

4. State/Country of Formation

FLORIDA, USA

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

65-1106194

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

Betty Jean Milham

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

902 Hollywood Blvd.

Suite, Apt. #, Etc.

City

Hollywood

State

FL

Zip Code

33019

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

Betsy Milham

REGISTERED AGENT MUST SIGN

Date 3-20-02

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
MGR	Betsy Milham	902 Hollywood Blvd.	Hollywood, FL 33019

REINSTATEMENT

01-02-02
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

Betsy Milham

Date

3-20-02

Daytime Phone #

954.926.6575

Typed or printed name of signing Managing Member/Manager

Betsy Milham