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BRGWR-813-223-9620

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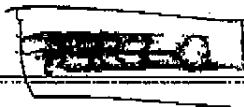
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LIMITED LIABILITY REINSTATEMENT

GULF BAY PROPERTIES, LLC

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

February 21, 2002

GULF BAY PROPERTIES, LLC
818-A SOUTH MAYDELL DRIVE
TAMPA, FL 33619

SUBJECT: GULF BAY PROPERTIES, LLC
REF: L00000015543

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

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TALLAHASSEE, FLORIDA

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L00000015543**

1. Limited Liability Company's Name

GULF BAY PROPERTIES, LLC

2. Principal Office Address

818-A SOUTH MAYDELL DRIVE

Suite, Apt. #, etc.

3. Mailing Office Address

818-A SOUTH MAYDELL DRIVE

Suite, Apt. #, etc.

City & State

TAMPA, FL

City & State

TAMPA, FL

Zip

33619

Country

USA

Zip

33619

Country

USA

4. State/Country of Formation
FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

09/28/2001

6. FEI Number

59-3695101

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

JOHN N. GIORDANO

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

220 S. FRANKLIN STREET

Suite, Apt. #, Etc.

City

TAMPA

State
FL

Zip Code
33602

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 606, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date **2-20-02**

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	RAYMOND MCNEMAR	818-A SOUTH MAYDELL DRIVE	TAMPA, FL 33619
MGR	STACEY THOMPSON	818-A SOUTH MAYDELL DRIVE	TAMPA, FL 33619

REINSTATEMENT 2001-2002

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 606, 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 606.406, 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

Date **2-20-02**

Daytime Phone # **(813) 361-3420**

Typed or printed name of signing Managing Member/Manager **RAYMOND MCNEMAR**

Fax Audit No. H02000041613 9