

JUN-22-2004(TUE) 09:48

KOSTO & ROTELLA P A.

(FAX) 407 423 5498

P 002/002

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM
DIVISION OF CORPORATIONSLIMITED LIABILITY
COMPANY
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 MAY 28 AM 11:15

LLO6/22/04

DOCUMENT # L01000001887

L Limited Liability Company's Name

L & B DORSCHER EQUITIES, LLC

REINSTATEMENT

2002-2004

1. Principal Office Address 8625 Pisa Dr.		3. Mailing Office Address		4. State/Country of Formation Florida	
Site, Apt. #, etc. #11213		Suite, Apt. #, etc.		5. Date Organized or Qualified To Do Business in Florida 2/5/01	
City & State Orlando, FL 32810		City & State		6. FEI Number ☒ Applied For ☐ Not Applicable	
Zip 32810	Country USA	Zip	Country	7. CERTIFICATE OF STATUS DESIRED ☐ \$5.00 Additional Fee required for a Certificate of Status	

B. Name and Address of Current Registered Agent

Name

Glavij Farahbakhsh

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

8625 Pisa Drive, #11213

Suite, Apt. #, Etc.

11213

City
OrlandoState
FLZip Code
32810

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

REGISTERED AGENT MUST SIGN

Date 5/5/04

I. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
FORM	Glavij Farahbakhsh	8625 Pisa Dr., #11213	Orlando, FL 32810
		2002-	700037389977
		2004	05/28/04 01004 004
			250.00

REINSTATEMENT

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

Date 4/30/04 Daytime Phone #

or printed name of signing Managing Member/Manager Glavij Farahbakhsh