

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
L01000003017
FLORIDA DEPARTMENT OF STATE
Jill Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 NOV -5 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L01000003017

Name and Mailing Address

0010435 01 FP 0.352 **PRSRT HB 0 0615 34683-770840
I AND I, LLC
2427 BENT TREE AVE. #2515
PALM HARBOR FL 34683-7708



10/4/2

CR2EC84 (8/02)

2. New Mailing Address 33381 U.S Hwy 19 NORTH City, State, Zip PALM HARBOR FL 34684		4. State/Country of Formation FL	
Principal Place of Business 2427 BENT TREE AVE. #2515 PALM HARBOR FL 34683		5. Date Organized or Qualified To Do Business in Florida 02/27/2001	
3. New Principal Place of Business Address 33381 U.S. Hwy 19 N. City, State, Zip PALM HARBOR FL 34684		6. FEI Number 59-3701042	
		7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent PATEL, MANOJ 2427 BENT TREE AVE. #2515 PALM HARBOR FL 34683	9. Name and Address of New Registered Agent Name: MANOJ PATEL Street Address (P.O. Box Number is Not Acceptable): 2521 N. FIELD LN. City: CLEARWATER FL Zip Code: 33761
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10. 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: Manoj Patel Date: 11/1/02

REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
OWNER	MANOJ PATEL	2521 N. FIELD LN.	CLEARWATER, FL. 33761
MANAGER	TANUJA PATEL	2521 N. FIELD LN.	CLEARWATER, FL. 33761
300008810959 11/05/02-01077-007 **155.00			
REINSTATEMENT 2002 BK			

12. 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: Manoj Patel Date: 11/1/02 Daytime Phone #: (727) 789-1994

Typed or printed name of signing Managing Member/Manager