

APPROVED
AND
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P. 2

102

FEB-3-04 TUE 11:55 AM

HOV 000023483

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

04 FEB-3 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L01000004762

1. Limited Liability Company's Name

R & N Development Group, LLC.

2. Principal Office Address

1019 W Sample Rd

Suite, Apt. #, etc.

3. Mailing Office Address

3300 UNIVERSITY DR

Suite, Apt. #, etc.

308

City & State

CORAL SPRINGS FL

City & State

CORAL SPRINGS FL

Zip

33065

Country

USA

Zip

33065

Country

USA

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

3/28/2001

6. FEI Number

651086781

Applied For

☐ Not Applicable

7. CERTIFICATE OF STATUS DENIED ☐

B. Name and Address of Current Registered Agent

Name

RICHARD S MILLINGER

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

3300 UNIVERSITY DR

Suite, Apt. #, Etc.

301

City

CORAL SPRINGS

State

FL

Zip Code

33065

9. I, being appointed the registered agent for the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date

1/30/04

10. Names and Street Addresses of Managing Members/Managers

Name	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City / State / Zip
ACRM	<u>ISHAAC RIZER</u>	<u>3300 UNIVERSITY DR #308</u>	<u>CORAL SPRINGS FL 33065</u>

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 605, F.S. I further certify that when filing this reinstatement application and motion for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 605.405, 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

[Signature]

Date

1/31/04

Daytime Phone #

904 575 0083

Typed or printed name of signing Managing Member/Manager

ISHAAC RIZER

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Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System

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DIVISION OF CORPORATIONS

ATTN: TREVOR

LIMITED LIABILITY REINSTATEMENT

R & N DEVELOPMENT GROUP, LLC

Certificate of Status	0
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