

19/2

2002-2003 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT
LLCR



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
2003 FEB 27 PM 1:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOCUMENT # L01000005658

1. Limited Liability Company's Name

Johnny Petrandis II, LLC

2. Principal Office Address

9105 Old St Augustine Rd

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

same

City & State

Tallahassee, FL 32311

City & State

Zip

Country

Zip

Country

4. State/Country of Formation

FL USA

5. Date Organized or Qualified

To Do Business in Florida 4/11/01

6. FEI Number

04-3634428

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

Johnny Petrandis II

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

9105 Old St Augustine Rd

Suite, Apt. #, Etc.

Tallahassee, FL

City

State
FL

Zip Code
32311

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

Date 2/27/03

REGISTERED AGENT MUST SIGN

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
Mgmem all	Johnny Petrandis II	9105 Old St Augustine Rd	Tallahassee, FL 32311

000013160660
02/27/03--01024--002 **1200.00

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

Date 2/27/03

Daytime Phone #

Typed or printed name of signing Managing Member/Manager

I did not receive The Annual Reports For
Johnny Petrandis II, LLC for 2002



FILED
2003 FEB 27 PM 1:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2 of 2