

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

APPLICATION FOR REINSTATEMENT
WBR

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 NOV -4 PM 2:18

1. DOCUMENT # L01000007951
Name and Mailing Address

0005606 01 FP 0.352 **PRSR T7 0 0615 34116-761448
R & R ENTERPRISES, LLC
5048 28TH AVENUE SW
NAPLES FL 34116-7614



W11/5

2. New Mailing Address City, State, Zip		4. State/Country of Formation FL	
Principal Place of Business 5048 28TH AVENUE SW NAPLES FL 34116		5. Date Organized or Qualified To Do Business in Florida 05/16/2001	
3. New Principal Place of Business Address City, State, Zip		6. FEI Number 59-3725351 Applied For Not Applicable	
8. Name and Address of Current Registered Agent OATES, MARC F. ESQ. C/O MARC F. OATES, P.A. 10001 TAMiami TRAIL NORTH, SUITE 114 NAPLES FL 34108		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
9. Name and Address of New Registered Agent Name: BLANE ROBERTSON Street Address (P.O. Box Number is Not Acceptable): 5048 28th Ave. SW. City: NAPLES FL Zip Code: 34116			
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: Blane Robertson REGISTERED AGENT MUST SIGN Date: 10/30/02			
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
MGRM	ROBERTSON, BLANE B	5048 28TH AVENUE SW	NAPLES FL 34116
MGRM	ROTH-ROBERTSON, VICTORIA	5048 28TH AVENUE SW	NAPLES FL 34116
900008780429 11/04/02 01050 002 ***50.00			

CR2E084 (8/02)

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: Blane Robertson
Date: 10/30/02
Daytime Phone: 239 571 8980

Typed or printed name of signing Managing Member/Manager

2062

R & R Enterprises, LLC
5048 28th Ave. SW
Naples, Fl. 34116

Dear Sirs:

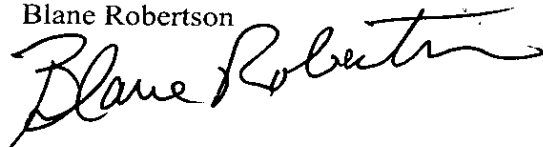
Enclosed, please find the reinstatement application form and a check for \$50.00. I do not recall receiving the original report.

Please accept my request to process the report with the \$50.00 filing fee and abate the \$100.00 reinstatement fee.

Thank you in advance for your co-operation.

Respectfully,

Blane Robertson



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