

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 DEC -1 AM 10:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L01000009932

1. Limited Liability Company's Name

PHOENIX I FUND, LLC

2. Principal Office Address

300 SCARLET BLVD SUITE A

Suite, Apt. #, etc.

Suite A

City & State

OLDSMAR FL

Zip

34677

Country

PINELLAS

3. Mailing Office Address

334 E. LAKE RD

Suite, Apt. #, etc.

#286

City & State

PAIM HARBOR FL

Zip

34685

Country

PINELLAS

4. State/Country of Formation

FL

5. Date Organized or Qualified  
To Do Business in Florida

6/20/01

6. FEI Number

59-373-6261

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

SAL FARINELLA

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

2624 SUNNYSIDE CIR

Suite, Apt. #, Etc.

City

PAIM HARBOR, FL 34685

State

FL

Zip Code

34684

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

REGISTERED AGENT MUST SIGN

Date 11-25-03

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
MGRM	FRANK VITACCO	3134 S. NORMA AVE #1	CHICAGO, FL 60616

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 11-25-03

Daytime Phone # 312-735-7997

Typed or printed name of signing Managing Member/Manager

FRANK VITACCO

CR2E041 (10/02)