State COLLED

1. DOCUMENT # L01000012222

Name and Mailing Address

03 MAY 16 AM 9:41

SEURETARY OF STATE TALLAHASSEE, FLORIDA



2. New Mailing Address				4. State/Country of Formation FL		
Principal Place of Business 3. New Principal Place of Busin			ss Address	6. FEI Number	77 4 77 1	Applied For
12243 DAWN VISTA DRIVE RIVERVIEW FL 33569				59-3736335 Not Applicable		
		City, State, Zip		CERTIFICATE OF STATUS DESIRED S5.00 Additional Fee required for a Certificate of Status		
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent		
ROBERTS, CORINNA A 12243 DAWN VISTA DRIVE RIVERVIEW FL 33569			Street Address (P.O. Bok Number is Not Acceptable) 12243 Dawn Vista Dr.			
ز			City Riverview FL 33569			- 33569
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/_ Olumb	GISTERED AGENT MOST SIGN	lerts		Date 4-29	-03
11. Names and Street Addresses of Each Managing Member/Manager						
Title(s)	e(s) Members/Managers Mana		eet Address of Each ging Member/Manag	lanager City / State / Zip		te / Zip
MGRM	Anthony J. Ro	berts Riverni	Dawn Vi: ew		Riverview,	FT 33569
			٠.	700 05/16/0	0019175 0301031004	027 **130.00
HEINSTATEMENT						
}			New Marine	· · · · · · · · · · · · · · · · · · ·	0019179	ino-
				04/16/	1 001917 5 7036001702	5 **67.00
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 filling 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 internation 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 Anthony J. Roberts (813) 757-2581 Typed or printed name of signing Managing Member/Manager Anthony J. Roberts (813) 673-0441						
Typed or printed name of signing Managing Member/Manager Anthony J. Roberts (813) 673-0441						

Fla. Dept. of Corporations Registration Section P.O. Box 6327 Tallahassee, Fl 32314

April 29, 2003

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Dear Dept. of Corporations,

Enclosed is the reinstatement paperwork along with a check for \$130.00, to reinstate:

The Heavenly Host, LLC 12243 Dawn Vista Dr. Riverview, Fl 33569

We recently applied to try to go non-profit and paid \$70.00 via internet and it was deducted from our checking account.

Please apply to \$70.00 toward the \$200.00 reinstatement fee, along with our check for \$130.00

Sincerely,

Anthony J. & Corinna A. Roberts 12243 Dawn Vista Dr. Riverview, FI 33569

(813) 672-0441