

PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY
COMPANY
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

1. Limited Liability Company's Name

First Victoria, LLC

L01000013025

9/26/03

PSK

TALLAHASSEE
STATE
OCT 28 AM 11:00
FILED
TALLAHASSEE, FLORIDA

150

2. Principal Office Address

3414 Dover Road

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 579

Suite, Apt. #, etc.

4. State/Country of Formation

Florida / USA

5. Date Organized or Qualified
To Do Business in Florida

NOV 2001

6. FID Number

65-1138792

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐\$5.00 Additional Fee required
for a Certificate of Status

City & State

Pompano Beach FL

City & State

Pompano Beach FL

Zip
33062Country
USAZip
33061Country
USA

8. Name and Address of Current Registered Agent

Name

Gary J. Milo

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

3414 Dover Rd

Suite, Apt. #, Etc.

City

Pompano Beach

State
FLZip Code
33062

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

Gary J. Milo

REGISTERED AGENT MUST SIGN

Date 10/28/2003

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Partner	Gary J. Milo, MGRM	3414 Dover Rd	Pompano Beach FL 33062

REINSTATEMENT 2003

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

Gary J. Milo

Date

10/28/03

Daytime Phone #

(561) 756 3020

Typed or printed name of signing Managing Member/Manager

GARY J. MILO