

L01000014432

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

FILED

02 DEC 12 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L01000014432

1. Limited Liability Company's Name

Sundancer Management Company, LLC

500009526925
12/16/02--01076--009 **150.00

2. Principal Office Address 350 Cumberland Avenue Suite, Apt. #, etc.		3. Mailing Office Address 350 Cumberland Avenue Suite, Apt. #, etc.		4. State/Country of Formation Florida	
City & State Ormond Beach, FL 32174		City & State Ormond Beach, FL		5. Date Organized or Qualified- To Do Business in Florida August 24, 2001	
Zip 32174	Country Volusia	Zip 32174	Country Volusia	6. FEI Number 46-0465906	Applied For Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent

Name

Cathleen J. Whitley

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

350 Cumberland Avenue

Suite, Apt. #, Etc.

City

Ormond Beach,

State

FL

Zip Code

32174

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

Cathleen J. Whitley
REGISTERED AGENT MUST SIGN

Date 12-10-02

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	J. Gordon Whitley	350 Cumberland Avenue	Ormond Beach, FL 32174

REINSTATEMENT

2002

12/12/02
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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

J. Gordon Whitley

Date 12-10-02

Daytime Phone# 386 6734032

Typed or printed name of signing Managing Member/Manager J. Gordon Whitley

CR2E041 (9/01)