

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

**L01000014506**

FILED

1. DOCUMENT # L01000014506

Name and Mailing Address

02 NOV -5 PM 4: 52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0002463 01 FP 0.352 \*\*PRSR T8 0 0615 33156-279000



LAUREL STREET INVESTMENTS, L.L.C.  
9200 SOUTH DADELAND BLVD.  
SUITE 825  
MIAMI FL 33156-2790



2. New Mailing Address

City, State, Zip

Principal Place of Business

9200 SOUTH DADELAND BLVD.  
SUITE 825  
MIAMI FL 33156

3. New Principal Place of Business Address

City, State, Zip

4. State/Country of Formation

FL

5. Date Organized or Qualified  
To Do Business in Florida

08/27/2001

6. FEI Number

65-1140809

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

WOOD, HUGH L JR.  
9200 SOUTH DADELAND BLVD.  
SUITE 825  
MIAMI FL 33156

9. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

*Hugh L. Wood, Jr.*  
REGISTERED AGENT MUST SIGN

Date

10/22/02

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
			300008581233 10/25/02--01006--001 - **155.00
MR.	HUGH L. WOOD, JR.	9200 SO. DADELAND BLVD SUITE PH-825	MIAMI, FL 33156

REINSTATEMENT 2002

*ML*

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

*Hugh L. Wood, Jr.*

Date

10/22/02

Daytime Phone #

305-670-1100

Typed or printed name of signing Managing Member/Manager

HUGH L. WOOD, JR.

CR2E084 (8/02)