

Apr. 19. 2004 11:44AM

No. 0140 P. 2
H040000826033

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**

04 APR 19 AM 9:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L01000015031

1. Limited Liability Company's Name

ATLANTIS HOLDINGS LLC

2. Principal Office Address

14 BALL MILL PLACE

Suite, Apt. #, etc.

City & State

ATLANTA GA

Zip

30350

Country

USA

3. Mailing Office Address

14 BALL MILL PLACE

Suite, Apt. #, etc.

City & State

ATLANTA GA

Zip

30350

Country

USA

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

8/31/2001

6. FEI Number

20-1011913

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

ROBB R MAASS

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

321 ROYAL POINCIANA PLAZA

Suite, Apt. #, Etc.

City

PALM BEACH

State
FL

Zip Code
33480

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 **4/19/04**

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 F. CALLAWAY	14 BALL MILL PLACE	ATLANTA GA 30350
MGRM	SUZANNE S. CALLAWAY	14 BALL MILL PLACE	ATLANTA GA 30350

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

Suzanne Callaway

Date **4/10/04**

Daytime Phone# **770-331-3471**

Typed or printed name of signing Managing Member/Manager

Suzanne S. Callaway

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Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : ALLEY MAASS ET AL (SJH)
Account Number : I19990000280
Phone : (561)659-1770
Fax Number : (561)833-2261

LIMITED LIABILITY REINSTATEMENT

ATLANTIS HOLDINGS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
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