

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/3

LIMITED LIABILITY  
COMPANY  
~~REINSTATEMENT~~  
UBR



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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L01000016109

1. Limited Liability Company's Name

CEGA, LLC

500009047845  
11/18/02--01059--001 \*\*150.00

RZE041 (9/01)

2. Principal Office Address  
3180 Mulford Road

3. Mailing Office Address  
3180 Mulford Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Mulberry, Florida

City & State  
Mulberry, Florida

Zip  
33860

Country  
Polk

Zip  
33860

Country  
Polk

4. State/Country of Formation  
Florida

5. Date Organized or Qualified  
To Do Business in Florida 9/20/01

6. FEI Number  
59-3759465

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  
Carl H. Bolter

Street Address (P.O. Box Number is Not Acceptable)  
638 Crescent Hills Place

Suite, Apt. #, Etc.

City  
Lakeland

State  
FL

Zip Code  
33813

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

Date

REGISTERED AGENT MUST SIGN

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
MGR	Carl H. Bolter	638 Crescent Hills Place	Lakeland, FL 33813

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

Date

11/11/02

Daytime Phone #

863-425-3222

Typed or printed name of signing Managing Member/Manager

293

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**CC&M**  
**CLARK, CAMPBELL & MAWHINNEY, P.A.**

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REGISTERED PATENT ATTORNEY

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\*\* Also admitted to practice in Tennessee

November 15, 2002

Florida Department of Revenue  
Division of Corporations  
Registration Section  
P. O. Box 6327  
Tallahassee, FL 32314

Re: Reinstatement of CEGA, LLC

To Whom It May Concern:

Enclosed for filing is the completed Reinstatement form and a check in the amount of \$150.00 to cover the \$100.00 Reinstatement Fee and \$50.00 Annual Report Fee for the above-referenced company.

Upon review of the Secretary of State's website, it reflects that the mailing address of the LLC is 638 Crescent Place, Lakeland, Florida 33813. The correct mailing address was 638 Crescent Hills Place, Lakeland, Florida 33813. We have learned that there is another Crescent Place address in Lakeland, and therefore, without the word Hills included the mail goes to that other address. The mail was not forwarded to our client's address, and therefore, they did not receive the UBR. Further, they recently moved their principal office address and mailing address to 3180 Mulford Road, Mulberry, Florida 33860 and note such on the Reinstatement form.

393

Florida Department of Revenue  
Division of Corporations  
November 15, 2002  
Page 2

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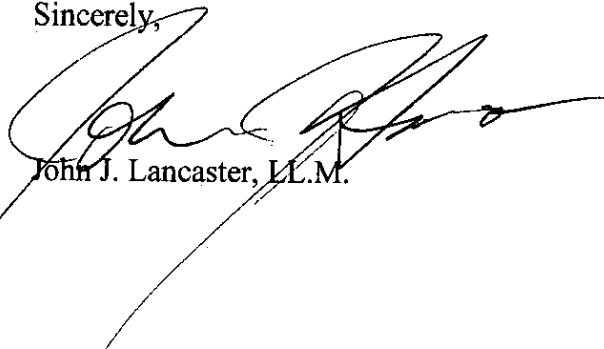
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We also note that last year was CEGA, LLC's first year of operating an LLC and they were unaware of the annual filing requirements. Going forward, they will timely file and pay the annual filing fee.

If you have any questions please do not hesitate to contact me.

Sincerely,



John J. Lancaster, LL.M.

JJL/dd  
Enclosures  
cc: Carl H. Bolter