

L01000016334

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED

FILED

03 OCT 16 AM 9:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT #

1. Limited Liability Company's Name

The Enterprise Group LLC  
Assigned Document # L01000016334

800023864178  
10/16/03--01088--012 \*\*200.00

2. Principal Office Address

138 Spyglass Lane

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 9605

Suite, Apt. #, etc.

City & State

Jupiter, FL

City & State

Riviera Beach, FL

Zip

33477

Country

USA

Zip

33419

Country

USA

4. State/Country of Formation

FL

5. Date Organized or Qualified  
To Do Business in Florida

Sept. 24, 2001

6. FEI Number

90-0018351

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

Peter Krieger

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

138 Spyglass Lane

Suite, Apt. #, Etc.

City

Jupiter

State

FL

Zip Code

33477

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

Peter Krieger

REGISTERED AGENT MUST SIGN

Date 10-15-03

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	Krieger Family Partners, Ltd.	138 Spyglass Lane	Jupiter, FL - 33477

REINSTATEMENT

2002-  
7003

JPB

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

Peter Krieger, on behalf of Krieger  
Group LLC

Date 10-15-03

Daytime Phone # 561-309-7396

Typed or printed name of signing Managing Member/Manager

Peter Krieger

CR2E041 (10/02)