

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L01000016526

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100022219341
08/20/03--01058--002 **50.00

100022219341
08/12/03--01010--002 **150.00

DOCUMENT # **L01000016526**

1. Limited Liability Company's Name

High Pines Management, LLC

2. Principal Office Address

114 Sheppard Rd. NW

Suite, Apt. #, etc.

3. Mailing Office Address

114 Sheppard Rd., NW

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33852

Country

Zip

33852

Country

4. State/Country of Formation

Florida

5. Date Organized or Qualified

To Do Business in Florida

September-26, 2001

6. FEI Number

☒ 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

Joseph Myrtetus

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

114 Sheppard Road, NW

Suite, Apt. #, Etc.

City

Lake Placid,

State
FL

Zip Code

33852

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

7/29/03

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	Joseph Myrtetus	114 Sheppard St., NW	Lake Placid, FL 33852
MGRM	Dorothy Myrtetus	114 Sheppard Str., NW	Lake Placid, FL 33852

REINSTATEMENT

2002-2003

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

7/29/03

Daytime Phone #

813-465-7969

Typed or printed name of signing Managing Member/Manager

Joseph Myrtetus