

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L01000018038

1 Limited Liability Company's Name

RAHEEL FOODS, L.L.C.

2. Principal Office Address - No P.O. Box #

9800 S. La Cienega Blvd. #380

Suite, Apt. #, etc.

City & State

Inglewood, CA

Zip

90301

Country

USA

3 Mailing Office Address

P.O. Box 16519

Suite, Apt. #, etc.

City & State

Encino, CA

Zip

91416

Country

USA

8 Name and Address of Current Registered Agent

Name

Registered Agents Inc.

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

3030 N. Rocky Point Dr., Ste. 150A

Apt. # Etc.

City

Tampa

State

FL

Zip Code

33607

4. State/Country of Formation

Florida

5 Date Organized or Qualified
To Do Business in Florida

10/17/2001

6 FEI Number

52-2354413

Applied For

☐ Not Applicable

7 CERTIFICATE OF STATUS DESIRED

\$5.00 Additional Fee required
for a certificate of status

CR2E041 (1/14)

W116-9694

100281939011
02/08/16--01015--025 **\$55.00

9 I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of
Registered Agent

Syed Raheel

REGISTERED AGENT MUST SIGN

Date **2/8/16**

10 Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representative/ Manager	City / State / Zip
Pres	Syed Raheel	P.O. Box 16519	Encino, CA 91416

REINSTATEMENT

2014

OWS
516.25

11 E-mail Address: **aberen@corpnet.com**

(To be used for future annual report notifications)

12. I certify that I am an authorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement of section 605.0012, 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Signature of authorized representative/member

Syed Raheel

Date **2/5/16**

Daytime Phone #

310-569-6205

Typed or printed name of signing authorized representative/member **Syed Raheel**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2016

CORPORATE ACCESS, INC.

SUBJECT: RAHEEL FOODS, L.L.C.
Ref. Number: W16000009694

We have received your document for RAHEEL FOODS, L.L.C. and your check(s) totaling \$655.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years through 2016; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$516.25.

The registered agent must sign accepting the designation.

Over payment of 138.75. If you would like a refund please send a letter requesting it and to whom to make the check out too.,

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 216A00002681