

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUL -2 PM 4:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MJH

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07/14/04--01062--002 **210.00

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DOCUMENT # L0100018887

1. Limited Liability Company's Name
BG & DJ, LLC

2. Principal Office Address
3030 Northeast 26th Street

3. Mailing Office Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL 33308

City & State

Zip

33308

Country

USA

Zip

Country

4. State/Country of Formation
Florida, USA

5. Date Organized or Qualified
To Do Business in Florida

OCTOBER 30, 2001

6. FEI Number

65--1152415

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

C. Christian Sautter, Esq.

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

2850 North Andrews Avenue

Suite, Apt. #, Etc.

City

Fort Lauderdale

State

FL

Zip Code

33311

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 June 30, 2004

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
O/MGR	Beverly Gail Commer	3030 Northeast 26th Street	Fort Lauderdale, FL 33308

2003-
2004

REINSTATEMENT

W/o Penalty

* no notice received *

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 6/30/2004 Daytime Phone# 954-568-2122

Typed or printed name of signing Managing Member/Manager Beverly Gail Commer, MGR

CR2E041 (10/02)