

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

2003 OCT 23 PM 3:30

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

300024028963
10/23/03--01010--025 **205.00



CR2E084 (8/02)

1. DOCUMENT # L01000021984

Name and Mailing Address

0006506 01 FP 0.352 **PRSR TO 0 0615 33629-554308



TIPTON LANDS LLC
2308 S. LILA LANE
TAMPA FL 33629-5543

2. New Mailing Address

City, State, Zip

Principal Place of Business

2308 S. LILA LANE
TAMPA FL 33629

3. New Principal Place of Business Address

City, State, Zip

4. State/Country of Formation

FL

5. Date Organized or Qualified
To Do Business in Florida

12/18/2001

6. FEI Number

59-3761157

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

MANSON, DOUGLAS P
2308 S. LILA LANE
TAMPA FL 33629

9. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

10. 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

Douglas P. Manson

REGISTERED AGENT MUST SIGN

Date

7/28/2003

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	MANSON, DOUGLAS P	2308 S. LILA LANE	TAMPA FL 33629
MGRM	MANSON, SARAH E	2308 S. LILA LANE	TAMPA FL 33629

REINSTATEMENT 2002-03

12. 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

Douglas P. Manson

Date

7/28/2003

Daytime Phone #

(813) 250 0577

Typed or printed name of signing Managing Member/Manager

Douglas Manson