

01000022136

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 25 PM 4:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 01000022136

1. Limited Liability Company's Name

DC Concepts, LLC

2. Principal Office Address

100 Countryside Drive
Suite, Apt. #, etc.

City & State

Longwood FL

Zip
32779

Country
USA

3. Mailing Office Address

100 Countryside Drive
Suite, Apt. #, etc.

City & State

Longwood FL

Zip
32779

Country
USA

4. State/Country of Formation

Florida USA

5. Date Organized or Qualified
To Do Business in Florida

10-26-01

6. FEI Number

30-0000620

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a Certificate of Status

200025083052

11/26/03--01071--001 **155.00

8. Name and Address of Current Registered Agent

Name

Christina M. Pendleton

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

100 Countryside Drive

Suite, Apt. #, Etc.

City

Longwood

State
FL

Zip Code

32779

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

Christina M. Pendleton

Date 11-20-03

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
MEM	Rosemarie A. Stankovich	100 Countryside Drive Longwood FL 32779	Longwood FL 32779
MEM	Donna S. Masluk	403 Cidermill Place	Lake Mary FL 32746

REINSTATEMENT 2003

11/25/03

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

Christina M. Pendleton

Date 11-20-03

Daytime Phone # 407-321-4500, 5376

Typed or printed name of signing Managing Member/Manager

Christina M. Pendleton

CR2E041 (10/02)