

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

10 MAY 13 PM 2:38

**DOCUMENT #**

1. Limited Liability Company's Name

MURPHY ADVENTURES, LLC

500180786395  
05/12/10--01037--027 \*\*793.75

CR2E041 (11/09)

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

66 TENNESSEE

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MURPHY, NC

City & State

Zip

28906

Country

US

Zip

Country

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified  
To Do Business in Florida

1/25/2002

6. FEI Number

01-0614161

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

JACOB C. DYKXHOORN

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

130 E. CENTRAL AVE

Suite, Apt. #, Etc.

100 West Stuart Avenue

City

LAKE WALES

State

FL

Zip Code

33853

☐ A \$100 reinstatement fee is imposed, except  
in circumstances which the entity did not  
receive the prior notices. By checking this  
box, you are certifying the prior notices were  
not received and requesting the \$100  
reinstatement be waived.

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

Jacob C. Dykxhoorn

REGISTERED AGENT MUST SIGN

Date 5-10-10

**10. Names and Street Addresses of Managing Members/Managers**

| Titles | Name of<br>Managing Members/Managers | Street Address of Each<br>Managing Member/Manager | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| MGR    | DAVID S. IMESON                      | 103 PINE SANDY BANK                               | CANTON, GA 30114   |
| MGR    | PENNY S. IMESON                      | 103 PINE SANDY BANK                               | CANTON, GA 30114   |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |

11. E-mail Address: Dave @ moosehollow.com

(To be used for future annual report notifications)

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

Uy

Date 5/7/10

Daytime Phone #

828 835 3491

Typed or printed name of signing Managing Member/Manager

# PETERSON & MYERS, P.A.

ATTORNEYS AT LAW • SINCE 1948

WINTER HAVEN  
(863) 294-3360  
Fax (863) 299-5498

P.O. Box 1079  
LAKE WALES, FLORIDA 33859-1079

100 WEST STUART AVENUE  
LAKE WALES, FLORIDA 33853  
(863) 676-7611 OR (863) 683-8942  
Fax (863) 676-0643

[www.PetersonMyers.com](http://www.PetersonMyers.com)

LAKELAND  
(863) 683-6511 OR (863) 676-6934  
Fax (863) 682-8031

Lake Wales, Florida  
May 10, 2010

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Re: Murphy Adventures, L.L.C.

Dear Sir:


Enclosed, for the purpose of reinstating the above named limited liability company, are the following:

1. Limited Liability Company Reinstatement.
2. Check in the amount of \$793.75, in payment of the \$100.00 reinstatement fee and \$693.75 for the Annual Report fee of \$138.75 for five (5) years.

Please call me if you have any questions or if you need anything further.

Sincerely,

PETERSON & MYERS, P. A.

  
Jacob C. Dykxhoorn

JCD/bv

Enclosures

cc: David S. Imeson, w/o enclosures

M. DAVID ALEXANDER, III  
JOHN B. ALLEN  
PHILIP O. ALLEN  
KEVIN A. ASHLEY  
JASON M. BERGWALL  
JACK P. BRANDON  
JOSHUA K. BROWN  
PHILIP H. BUSH

DEBRA L. CLINE  
J. DAVIS CONNOR  
CLINTON A. CURTIS  
JACOB C. DYKXHOORN  
DAVID G. FISHER  
MICHAEL T. GALLAHER  
JOHN R. GRIFFITH  
DAVID E. GRISHAM

JOHN D. HOPPE  
TIMOTHY E. KILEY  
KEVIN C. KNOWLTON  
ALEXANDER F. KOSKEY, III  
DOUGLAS A. LOCKWOOD, III  
BRIAN K. MATHIS  
CORNEAL B. MYERS  
E. BLAKE PAUL

ROBERT E. PUTERBAUGH  
THOMAS B. PUTNAM, JR.  
JENNIFER A. RUMPH  
DEBORAH A. RUSTER  
STEPHEN R. SENN  
ANDREA TEVES SMITH  
KEITH H. WADSWORTH  
KERRY M. WILSON

THOMAS E. BAYNES, JR.  
OF COUNSEL

