

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC 18 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000004368

1. Limited Liability Company's Name

T.G.O.B. LLC

2. Principal Office Address

80241 Overseas Hwy

Suite, Apt. #, etc.

City & State

Islamorada, FL

Zip

33036

Country

USA

3. Mailing Office Address

P.O. Box 573

Suite, Apt. #, etc.

City & State

Islamorada, FL

Zip

33036

Country

USA

4. State/Country of Formation

Florida, USA

5. Date Organized or Qualified
To Do Business in Florida

2/22/2002

6. FEI Number

030390100

☒ 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

Brian Linelback

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

80241 USA

Suite, Apt. #, Etc.

City

Islamorada

State

FL

Zip Code

33036

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

Brian Linelback

REGISTERED AGENT MUST SIGN

Date 12/11/2003

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
MGR	Brian Linelback	80241 Overseas Hwy	Islamorada FL 33036

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

Brian Linelback

Date 12/11/03

Daytime Phone# (905) 664 2132

Typed or printed name of signing Managing Member/Manager Brian Linelback

CR2E041 (10/02)