

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

L02000005218

FILED
OCT 23 AM 9:53
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02000005218

1. Limited Liability Company's Name

SHUBH HOTELS BOCA LLC

9/23/03

PK

2. Principal Office Address

8402 Hookout Circle

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Boca Raton, FL

City & State

Zip

33493

Country

US

Zip

Country

4. State/Country of Formation

FL

5. Date Organized or Qualified
To Do Business in Florida

3/5/02

6. FEI Number

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

Jane C. Rankin, Esquire

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

1 E. Broward Blvd.

Suite, Apt. #, Etc.

Suite 1600

City

Ft. Lauderdale.

State

FL

Zip Code

33301

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

[Signature] J.C. Rankin, Esq.

Date

10/23/03

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
Mgr.	Atul Bisaria	8402 Hookout Circle	Boca Raton, FL 33493

REINSTATEMENT 2003

6000024064316

PK

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

[Signature]

Date

10/23/03

Daytime Phone #

Typed or printed name of signing Managing Member/Manager

Atul Bisaria

CR2001 (10/02)



L02000005218

ACCOUNT NO. : 072100000032

REFERENCE : 292505 11663B

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 150.00

ORDER DATE : October 23, 2003

ORDER TIME : 3:06 PM

ORDER NO. : 292505-005

CUSTOMER NO: 11663B

CUSTOMER: Jane C. Rankin, Esq
Kubicki Draper
Suite 1600
One E. Broward Boulevard
Ft. Lauderdale, FL 33301

BK

SHUBH HOTELS BOCA LLC
TALLAHASSEE, FLORIDA

03 OCT 23 AM 9:53

FILED

DOMESTIC FILINGS

NAME: SHUBH HOTELS BOCA LLC

003900058040

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma

SHUBH HOTELS BOCA LLC
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
STATE OF FLORIDA

03 OCT 23 PM 4:29

RECEIVED