

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02060006799

1. Limited Liability Company's Name

Braun Construction L.L.C.

FILED

08 FEB 12 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700117825327
02/12/08--01013--005 **\$16.25

REINSTATEMENT 06-08

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

12405 River Rd.

Suite, Apt. #, etc.

3. Mailing Office Address

12405 River Rd.

Suite, Apt. #, etc.

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

3/22/02

6. FEI Number

04-3626927

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

Richard H. Braun

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

12405 River Rd.

Suite, Apt. #, Etc.

City

Ft. Myers

State

FL

Zip Code

33905

☒ 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

Richard H. Braun

Date

2/7/08

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	Richard H. Braun	12405 River Rd.	Ft. Myers, FL 33905
		<u>\$72/22</u>	

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

Richard H. Braun

Date

2/7/08

Daytime Phone #

(239) 464-3696

Typed or printed name of signing Managing Member/Manager

Richard H. Braun