

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 MAR 10 PM 3:28

DOCUMENT # L02000008423

1. Limited Liability Company's Name

SBI, L.L.C.

2. Principal Office Address

165 GOLDEN BEACH DRIVE

Suite, Apt. #, etc.

City & State

GOLDEN BEACH, FL

Zip

33160

Country

USA

3. Mailing Office Address

165 GOLDEN BEACH DRIVE

Suite, Apt. #, etc.

City & State

GOLDEN BEACH, FL

Zip

33160

Country

USA

4. State/Country of Formation

FL

**5. Date Organized or Qualified
To Do Business in Florida**

4/9/02

6. FEI Number

82-0546146

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

BENHAMOU, GILBERT

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

165 GOLDEN BEACH DRIVE 800030234808

Suite, Apt. #, Etc.

City

GOLDEN BEACH

State

FL

Zip Code

33160

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

X

REGISTERED AGENT MUST SIGN

Date 1/14/04

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	BENHAMOU, GILBERT	165 GOLDEN BEACH DRIVE	GOLDEN BEACH, FL 33160

REINSTATEMENT

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

X

Date 1/14/04

Daytime Phone # 305-776-7778

Typed or printed name of signing Managing Member/Manager

GILBERT BENHAMOU

CR2E041 (10/02)

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CG Accounting Corporation

4101 Ravenswood Road, Suite 111, Fort Lauderdale, FL 33312 (954) 327-4617 Fax (954) 327-4618

January 14, 2003

Division of Corporations
PO Box 6327
Tallahassee, FL 32314-6327

**Re: SBI, L.L.C.
#L02000008423
UBR - 2003, 2004**

Dear State of Florida Representative,

We are the accountants for the above named taxpayer. This corporation never received their UBR FOR 2003 in the mail. We sent an e-mail (copy enclosed) to advise us how to proceed.

We are submitting the reinstatement application together with the \$100 fee (\$50 for 2003 and \$50 for 2004). We appreciate the abatement of the reinstatement fee.

If any additional information is needed, please contact us.

Very truly yours,



David Goldis

DTG/cb