

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L02000011858

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 OCT 24 PM 2:07

1. DOCUMENT # L02000011858

Name and Mailing Address

0013889 01 AT 0.292 \*\*AUTO T1 O 0615 33904-722381



PARADISE PROPERTIES GROUP, LLC  
3501 DEL PRADO BLVD. #306  
CAPE CORAL FL 33904-7223



2. New Mailing Address

3501 DEL PRADO BLVD. Suite 306

City, State, Zip  
CAPE CORAL, FL 33904

Principal Place of Business  
3501 DEL PRADO BLVD. #306  
CAPE CORAL FL 33904

3. New Principal Place of Business Address

City, State, Zip

4. State/Country of Formation  
FL

5. Date Organized or Qualified  
To Do Business in Florida 05/16/2002

6. FEI Number  
03-0442126  
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

SPIEGEL & UTRERA, P.A.  
1840 SOUTHWEST 22 STREET  
4TH FLOOR  
MIAMI FL 33145

9. Name and Address of New Registered Agent

Name  
JOSEPH A. MARTNER  
Street Address (P.O. Box Number is Not Acceptable)  
3501 DEL PRADO BLVD. Suite 306  
City  
CAPE CORAL FL Zip Code  
33904

10. 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   
REGISTERED AGENT MUST SIGN

Date 10-24-03

11. Names and Street Addresses of Each Managing Member/Manager

| Title(s) | Name of Managing<br>Members/Managers | Street Address of Each<br>Managing Member/Manager | City / State / Zip  |
|----------|--------------------------------------|---|---------------------|
| MGR      | MARTNER, JOSEPH A                    | 3501 DEL PRADO BLVD. #306                         | CAPE CORAL FL 33904 |
|          |                                      |   |                     |
|          |                                      |   |                     |
|          |                                      |   |                     |
|          |                                      |   |                     |
|          |                                      |   |                     |
|          |                                      |   |                     |
|          |                                      |   |                     |

REINSTATEMENT 2003

Let 10/24

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   
Date 10-24-03 Daytime Phone # 239-540-4946

Typed or printed name of signing Managing Member/Manager

CR2E084 (7/03)