

L02000012006

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 NOV 18 PM 1:40

12/01

DOCUMENT # L02000012006

1. Limited Liability Company's Name

Southshore Realty of Tampa Bay, LLC.

REINSTATEMENT 2003

400024796954
11/18/03--01033--009 **150.00

2. Principal Office Address

13308 Waterford Run Dr.

Suite, Apt. #, etc.

City & State

Riverview FL

Zip

33569

Country

Hillsborough

3. Mailing Office Address

13308 Waterford Run Dr

Suite, Apt. #, etc.

City & State

Riverview FL

Zip

33569

Country

Hillsborough

4. State/Country of Formation

Florida

5. Date Organized or Qualified To Do Business in Florida

5/13/02

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

William Matos Jr.

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

13308 Waterford Run Dr.

Suite, Apt. #, Etc.

City

Riverview

State

FL

Zip Code

33569

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]

Date

11/10/03

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	William Matos Jr.	13308 Waterford Run Dr.	Riverview FL 33569
	REINSTATEMENT	2003	

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

11/10/03

Daytime Phone #

Typed or printed name of signing Managing Member/Manager