

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

06 SEP 14 AM 11:11

DOCUMENT # L02000013641

1. Limited Liability Company's Name

ENIR REALTY, L.L.C.

2. Principal Office Address

18770 N.E. 21st Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

18770 N.E. 21st Avenue

Suite, Apt. #, etc.

City & State

North Miami Beach, FL

City & State

North Miami Beach, FL

Zip

33179

Country

USA

Zip

33179

Country

USA

4. State/Country of Formation

Florida/USA

5. Date Organized or Qualified
To Do Business in Florida

6/4/02

6. FEI Number

010723890

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

KERRY E. ROSENTHAL

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

2875 N.E. 191 Street

Suite, Apt. #, Etc.

Suite 500

City

Aventura

State

FL

Zip Code

33180

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

Date

9/7/06

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.	Nakhamkin, Eduard	18770 N.E. 21st Avenue	North Miami Beach, FL 33179

900080459188
10/04/06--01033--022 **150.00

REINSTATEMENT 04-06

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

Date

9/7/06

Daytime Phone #

305 937 0300

Typed or printed name of signing Managing Member/Manager

Eduard Nakhamkin

LAW OFFICES



**ROSENTHAL
ROSENTHAL
RASCO, LLC**

September 7, 2006

Florida Department of State
Division of Corporation
P.O. Box 1500
Tallahassee, FL 32302-1500

Attn: Reinstatement Section

**Re: ENIR REALTY, L.L.C.
Document No. L02000013641**

Dear Sir/Madam:

Enclosed herewith please find Limited Liability Reinstatement form for the above-referenced Company, which was dissolved in 2004. Due to a change of address my client did not receive the annual business reports, and only recently became aware that the entity was dissolved. We ask that you waive the reinstatement fee and accept the annual report fees for 2004, 2005, and 2006. Our trust account check in the amount of \$150.00 is enclosed herewith.

Thank you for your courtesy and cooperation in connection with this matter. Should you have any questions, please do not hesitate to contact the undersigned.

Very truly yours,

ROSENTHAL ROSENTHAL RASCO

By: 

Kerry E. Rosenthal, Esq.

KER:emh

encls.

148098 - 1

EDUARDO I. RASCO
ALAN S. ROSENTHAL
Certified Civil Mediator
KERRY E. ROSENTHAL
*Florida Board Certified Real Estate
Attorney*

NICHOLAS I. GERSON
DESI ROBERT KELLERMANN
JESSICA B. LASSMAN
Certified Family Mediator
HEATHER A. SCOTT