

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L02000014239

1. Entity Name
PALMER & CAY OF FLORIDA, LLC



Principal Place of Business
25 BULL STREET
SAVANNAH, GA 31401

Mailing Address
P.O. BOX 847
SAVANNAH, GA 31402-0847

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10032005 REIN-LLC CR2E101 (6/04)

4. FEI Number
59-3745270

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

Brian Courtney
Asst. V. Pres.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10/4/03

FILE NOW!!! FEE IS \$150.00
After January 1, 2006, Fee will be \$200.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☒ Delete
NAME SACH, CHRISTOPHER
STREET ADDRESS 25 BULL STREET
CITY-ST-ZIP SAVANNAH, GA 31401

TITLE President ☐ Change ☒ Addition
NAME Stewart W McDowell, Jr
STREET ADDRESS 227 W. Trade St
CITY-ST-ZIP Charlotte, NC 28202

TITLE MGR ☒ Delete
NAME CAY, JOHN E III
STREET ADDRESS 25 BULL STREET
CITY-ST-ZIP SAVANNAH, GA 31401

TITLE V.P. ☐ Change ☐ Addition
NAME Carol R. Mullis
STREET ADDRESS 301 S. College St
CITY-ST-ZIP Charlotte, NC 28288

TITLE MGR ☒ Delete
NAME CROWLEY, F. MICHAEL
STREET ADDRESS 25 BULL STREET
CITY-ST-ZIP SAVANNAH, GA 31401

TITLE CFO ☐ Change ☐ Addition
NAME Karen Lehman
STREET ADDRESS 101 N Main St
CITY-ST-ZIP Winston Salem, NC 27101

TITLE MGR ☒ Delete
NAME HOFELE, DAVID M
STREET ADDRESS 25 BULL STREET
CITY-ST-ZIP SAVANNAH, GA 31401

TITLE Sec. ☐ Change ☐ Addition
NAME Daniel Glassberg
STREET ADDRESS 301 S. College St
CITY-ST-ZIP Charlotte, NC 28288

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Carol R Mullis, V.P.

Date

10/3/2005 704-715-240

Daytime Phone #

FILED
05 OCT -4 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 2005

200060218182



CORPORATION SERVICE COMPANY

LU2000014239

ACCOUNT NO. : 072100000032

REFERENCE : 632848 167868A

AUTHORIZATION

COST LIMIT

Patricia Pigott
\$1504.00

FILED
05 OCT -4 PM 2:19
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ORDER DATE : October 4, 2005

ORDER TIME : 11:41 AM

ORDER NO. : 632848-005

CUSTOMER NO: 167868A

[Handwritten signature]

DOMESTIC FILINGS

NAME: PALMER & CAY OF FLORIDA, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kelly Courtney - Ext# 2916

EXAMINER'S INITIALS _____

RECEIVED
05 OCT -4 PM 12:59
DIVISION OF CORPORATION