

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 OCT 23 AM 10:13

DOCUMENT # L02000015285

1. Limited Liability Company's Name

Lakeland Country Club, L.L.C.
Country

600081525756
11/06/06--01005--005 **300.00

CR2E041 (8/05)

2. Principal Office Address

2 University Plaza
Suite, Apt. #, etc.
Suite 402

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Hackensack, NJ

City & State

Zip

07601

Country

USA

Zip

Country

4. State/Country of Formation

Florida/USA

5. Date Organized or Qualified To Do Business in Florida

6/19/02

6. FEI Number EIN

20-0777685

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 M. Midyette III, Esq.

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

225 East Lemon Street, Suite 300

Suite, Apt. #, Etc.

City

Lakeland, FL 33801

State

FL

Zip Code

33801

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

William M. Midyette III

REGISTERED AGENT MUST SIGN

Date

9.1.2006

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
	See attached Exhibit "A" for membership list.		

REINSTATEMENT 03-06

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

Joseph Walter

Date

8/29/06

Daytime Phone #

201 342 8500

Typed or printed name of signing Managing Member/Manager

Joseph Walter

Pillar Funding, LLC, 2 University Plaza, Suite 402, Hackensack, NJ 07601

Reel Funding, Inc., 2 University Plaza, Suite 402, Hackensack, NJ 07601

J.K.G. Financing, Inc., 2 University Plaza, Suite 402, Hackensack, NJ 07601

Nessor Development, P.O. Box 603, NY, NY 10024

J.K.G. Financing, Inc. DBP, 2 University Plaza, Suite 402, Hackensack, NJ 07601

Ashton Global Enterprises, Inc., c/o Madison Realty, 261 Madison Ave, 18th Fl, NY, NY 10016

M.L. Beer Investments, Inc., 2 University Plaza, Suite 402, Hackensack, NJ 07601

Trust U/A 11/1/71 FBO Ingrid Beer, c/o Herrick Feinstein, 2 Park Avenue, New York, NY 10016

Trust U/A 11/1/71 FBO James Beer, c/o Herrick Feinstein, 2 Park Avenue, New York, NY 10016

Trust U/A 11/1/71 FBO Michele Beer, c/o Herrick Feinstein, 2 Park Avenue, New York, NY 10016

Members

Managing member:

Joseph Wolfer

Lakeland Country Club, L.L.C

2 University Plaza, Suite 402

Hackensack, NJ 07601

