

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

05 MAR 30 AM 10:33

**DOCUMENT #**

L02000015919

1. Limited Liability Company's Name

BLUE COAST CONSTRUCTION GROUP LLC.

2. Principal Office Address

2853 Executive Park Dr.

3. Mailing Office Address

2853 Executive Park Dr

Suite, Apt. #, etc.

Suite # 104

Suite, Apt. #, etc.

Suite 104

City & State

WESTON, Florida

City & State

Weston Florida

Zip

33331-3603

Country

USA

Zip

33331-3603

Country

USA

4. State/Country of Formation

Florida

5. Date Organized or Qualified  
To Do Business in Florida

June 25, 2002

6. FEI Number

11-3680071

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

Mr. Fernando DaCosta

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

2853 Executive Park Dr.

Suite, Apt. #, Etc.

Suite # 104

City

WESTON

State

FL

Zip Code

33331-3603

**REINSTATEMENT** 03-05

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

REGISTERED AGENT MUST SIGN

Date 03/09/2005

**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
MGRM	FERNANDO DACOSTA	2853 Executive Park Dr #104	Weston, Fl, 33331-3603

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 03/09/2005

Daytime Phone# (954) 660-0172

Typed or printed name of signing Managing Member/Manager Fernando DaCosta.

CR2E041 (10/02)