

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

03 OCT 30 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #**

**L02000017797**

**1. Limited Liability Company's Name**

**FIRST FLORIDA HOLDING AND COMPANY, LLC**

**2. Principal Office Address**

**1600 15th STREET**

Suite, Apt. #, etc.

**Plaza 15, No. 310  
FL**

City & State

**Ft. Lauderdale, FL**

Zip

**33316**

Country

**USA**

**3. Mailing Office Address**

**1600 15th STREET**

Suite, Apt. #, etc.

**Plaza 15, No. 310**

City & State

**Ft. Lauderdale, FL**

Zip

**33316**

Country

**USA**

**4. State/Country of Formation**

**FLORIDA**

**5. Date Organized or Qualified**

To Do Business in Florida **7-15-2002**

**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

**MICHAEL PALMISANO**

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

**1600 15th STREET, PLAZA 15, NO. 310**

Suite, Apt. #, Etc.

City

**FT. LAUDERDALE,**

State

**FL**

Zip Code

**33316**

**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

*Michael Palmisano*

Date **10/10/2003**

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
<b>MGR</b>	<b>FIELDER PROPERTY, INC.</b>	<b>410 WYE EAST LANE</b>	<b>QUEENSTOWN, MD 21658</b>

**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.**

**BY: FIELDER PROPERTY, INC., a Maryland Corporation**

Signature of

Managing Member/Manager

*Michael Palmisano*

Date **10/10/2003** Daytime Phone# **410-827-5312**

**By: Michael Palmisano, President**

Typed or printed name of signing Managing Member/Manager

CR2E041 (10/02)