

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 # **L020000/7800**

1. Limited Liability Company's Name

FIRST FLORIDA HOLDING AND COMPANY II, 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
MGR	FIELDER PROPERTY, INC.	410 WYE EAST LANE	QUEENSTOWN, MD 21658

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

CR20041 (10/02)