

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

1 of 2
FILED

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 JUL 19 PM 1:36

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **L020000 19670**

1. Limited Liability Company's Name

UNIVERSAL HEIRLOOM, LLC

NJH

2. Principal Office Address

2525 N SR 7

Suite, Apt. #, etc.

SUITE 115

City & State

HOLLYWOOD, FL

Zip

33021

Country

BROWARD

3. Mailing Office Address

2525 N SR 7

Suite, Apt. #, etc.

SUITE 115

City & State

HOLLYWOOD, FL

Zip

33021

Country

BROWARD

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

8/2/02

6. FEI Number

52-2369215

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

7/19

8. Name and Address of Current Registered Agent

Name

DANIEL BENGIO

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

2525 N STATE ROAD 7

Suite, Apt. #, Etc.

SUITE 115

City

HOLLYWOOD

800039190758

07/15/04-01060-001 **100 00

State

FL

Zip Code

33021

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

[Signature]

REGISTERED AGENT MUST SIGN

Date **7/12/04**

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
MEM	LEDUC, REJEAN	2525 N SR 7, #115	HOLLYWOOD, FL 33021

REINSTATEMENT

w/o penalty fees

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

[Signature]

Date **7/12/04**

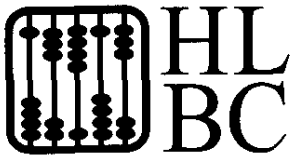
Daytime Phone #

Typed or printed name of signing Managing Member/Manager

REJEAN LEDUC

CFR2041 (10/02)

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HOFFMAN, LEVY, BENGIO & Co., PL
Certified Public Accountants and Consultants

2525 N. STATE ROAD 7 • SUITE 115
HOLLYWOOD, FL 33021
TEL: (954) 966-1141 • FAX: (954) 966-2474

July 9, 2004

Uniform Business Report
Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: UNIVERSAL HEIRLOOM, LLC

To Whom It May Concern:

Enclosed please find a copy of the UBR for 2004 for UNIVERSAL HEIRLOOM, LLC as well as a check for \$100.00.

The company changed addresses during 2003 and never received the mail regarding the renewal notices of the UBR.

At this time, we respectfully request that you waive the late penalties reinstate the company and accept the enclosed check as full payment. Should you have any questions, please do not hesitate to contact me at 954-966-1141 x-222.

Thanking you in advance,

Sincerely,

Daniel Bengio, CPA

Encl.