

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**L02000020685**

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF REVENUE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

2003 OCT 23 AM 9:33

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

1. DOCUMENT # L02000020685  
Name and Mailing Address

0013635 01 AT 0.292 \*\*AUTO T9 0 0615 34606-431077  
SUNCOAST DESIGN GROUP LLC  
1377 KASS CIRCLE  
SPRING HILL FL 34606-4310

503177900694



06/23/03 90002 005 \$50.00

|   |  |  |  |
|---|--|--|--|
| 2. New Mailing Address<br><br>City, State, Zip                          |  | 4. State/Country of Formation<br>FL  |  |
| Principal Place of Business<br>1377 KASS CIRCLE<br>SPRING HILL FL 34606 |  | 5. Date Organized or Qualified To Do Business in Florida<br>08/13/2002   |  |
| 3. New Principal Place of Business Address<br><br>City, State, Zip      |  | 6. FEI Number<br>54-2069900  |  |
|   |  | Applied For<br>Not Applicable  |  |
|   |  | 7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status |  |

|  |  |  |  |
|--|--|--|--|
| 8. Name and Address of Current Registered Agent<br><br>PROSCIA, NICK<br>1375 KASS CIRCLE<br>SPRING HILL FL 34606 |  | 9. Name and Address of New Registered Agent<br><br>Name<br><br>Street Address (P.O. Box Number is Not Acceptable)<br><br>City<br>FL Zip Code |  |
|--|--|--|--|

10. 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 *Nick Proscia* **SIGNATURE REQUIRED** Date 10/20/03  
REGISTERED AGENT MUST SIGN

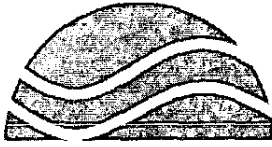
11. Names and Street Addresses of Each Managing Member/Manager

| Title(s)       | Name of Managing Members/Managers | Street Address of Each Managing Member/Manager | City / State / Zip     |
|----------------|-----------------------------------|--|------------------------|
| Member Manager | Nick Proscia                      | 1377 Kass Circle                               | Spring Hill, Fl. 34606 |
|                |                                   |  |                        |
|                |                                   |  |                        |
|                |                                   |  |                        |
|                |                                   |  |                        |
|                |                                   |  |                        |

**REINSTATEMENT 2003**

12. 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 *Nick Proscia* **SIGNATURE REQUIRED** Date 10/20/03 Daytime Phone # 352-688-3606  
Typed or printed name of signing Managing Member/Manager Nick Proscia



ARCHITECTURAL DESIGN

## SUNCOAST DESIGN GROUP LLC

2003 OCT 23 AM 9:33

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

October 20, 2003

Florida Department of State  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, Fl 32314-6327

We are responding to your Application for Reinstatement sent to us. Our report was mailed in on June 16, 2003 with our check number 2067. We received a request for correction on your letter dated June 25<sup>th</sup> for missing information.

We mailed the completed correction on July 21, 2003. As per my telephone conversation today with Nanette, I was informed the report was returned again on July 26<sup>th</sup> however, **we did not receive it**. Nanette explained we are only to report the Manager Member not Members. Apparently this is why our report was rejected.

We are submitting the reinstatement form and have been told that our check was received.

Thank you,  
SUNCOAST DESIGN GROUP LLC

Dorothy Kraft  
Office Manager