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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

1. **DOCUMENT #** L02000022378

Name and Mailing Address

03 OCT 27 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0010162 01 AT 0.292 **AUTO T7 2 0615 33765-210302



WHITE SANDS L.L.C.
802 NORTH BELCHER ROAD
CLEARWATER FL 33765-2103



2. New Mailing Address		4. State/Country of Formation FL																													
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 08/29/2002																													
Principal Place of Business 802 NORTH BELCHER ROAD CLEARWATER FL 33765	3. New Principal Place of Business Address	6. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																												
City, State, Zip		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 PATEL, HARISH 802 NORTH BELCHER ROAD CLEARWATER FL 33765		9. Name and Address of New Registered Agent Name Street Address, P.O. Box Number, if Not Applicable REINSTATEMENT City 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 SIGNATURE REQUIRED REGISTERED AGENT MUST SIGN																															
11. Names and Street Addresses of Each Managing Member/Manager <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Title(s)</th> <th style="width: 30%;">Name of Managing Members/Managers</th> <th style="width: 40%;">Street Address of Each Managing Member/Manager</th> <th style="width: 20%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>PATEL, HARISH</td> <td>802 NORTH BELCHER ROAD</td> <td>CLEARWATER FL 33765</td> </tr> <tr> <td>MGRM</td> <td>LELE, UDAY</td> <td>802 NORTH BELCHER ROAD</td> <td>CLEARWATER FL 33765</td> </tr> <tr> <td>MGRM</td> <td>D'SOUZA, GERARD</td> <td>802 NORTH BELCHER ROAD</td> <td>CLEARWATER FL 33765</td> </tr> <tr> <td>MGRM</td> <td>R.K. FAMILY LTD. PARTNERSHIP</td> <td>802 NORTH BELCHER ROAD</td> <td>CLEARWATER FL 33765</td> </tr> <tr> <td>MGRM</td> <td>NANDA LLC</td> <td>802 NORTH BELCHER ROAD</td> <td>CLEARWATER FL 33765</td> </tr> <tr> <td>MGRM</td> <td>BEACHAM, SUSHILA</td> <td>802 NORTH BELCHER ROAD</td> <td>CLEARWATER FL 33765</td> </tr> </tbody> </table>				Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MGRM	PATEL, HARISH	802 NORTH BELCHER ROAD	CLEARWATER FL 33765	MGRM	LELE, UDAY	802 NORTH BELCHER ROAD	CLEARWATER FL 33765	MGRM	D'SOUZA, GERARD	802 NORTH BELCHER ROAD	CLEARWATER FL 33765	MGRM	R.K. FAMILY LTD. PARTNERSHIP	802 NORTH BELCHER ROAD	CLEARWATER FL 33765	MGRM	NANDA LLC	802 NORTH BELCHER ROAD	CLEARWATER FL 33765	MGRM	BEACHAM, SUSHILA	802 NORTH BELCHER ROAD	CLEARWATER FL 33765
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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

SIGNATURE REQUIRED

Date **10-16-03** Daytime Phone #

Typed or printed name of signing Managing Member/Manager

CR2E034 (7/03)