

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2004 APR 26 P 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # LO2000024463

1. Limited Liability Company's Name

HUNTINGTON PARTNERS, LLC

2. Principal Office Address

2729 State Rd 580

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Cleawater, Florida

City & State

Zip

33761

Country

Pinkilla

Zip

Country

4. State/Country of Formation

**5. Date Organized or Qualified
To Do Business in Florida**

9/14/02

6. FEI Number

86-1069124

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

Anthony Marattoli

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

2729 State Road 580

Suite, Apt. #, Etc.

City

Cleawater, Florida

State

FL

Zip Code

33761

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

4/23/2004

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
President	Anthony Marattoli	2729 State Road 580	Cleawater, Florida 33761

REINSTATEMENT 03-04

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 reasons 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

4/23/2004

Daytime Phone #

(929) 924-6565

Typed or printed name of signing Managing Member/Manager