PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
06 FEB -8 AM 10:55

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CR2E041 (8/05)

1. Limited Liability Company's Name
Sandzaland, LLC

2. Principal Office Address	3. Mailing Office Address
3606 1/2 Gulf Blvd.	P O Box 3577
Suite, Apt. #, etc.: #5	Suite, Apt. #, etc.:
City & State: Saint Pete Beach, Fl.	City & State: Saint Petersburg, Fl.
Zip: 33706 Country: USA	Zip: 33731 Country: USA

4. State/Country of Formation: Fl/usa

5. Date Organized or Qualified To Do Business in Florida: 09/24/2002

6. FEI Number: 101462884 ☐ 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: C. R. Hollands

Street Address (P.O. Box Number is Not Acceptable): 3606 1/2 Gulf Blvd

Suite, Apt. #, Etc.: #5

City: Saint Pete Beach State: FL Zip Code: 33706

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: C. R. Hollands REGISTERED AGENT MUST SIGN Date: 01/25/2006

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
Pres	C. R. Hollands	3606 1/2 #5 Gulf Blvd.	St. Pete Beach, Fl. 337

REINSTATEMENT 04-06

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: C. R. Hollands Date: 01/25/2006 Daytime Phone #: 727-642-4141

Typed or printed name of signing Managing Member/Manager: C. R. Hollands