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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
03 DEC 31 PM 5:55
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1. DOCUMENT # L02000025598

Name and Mailing Address

0004771 01 AT 0.292 **AUTO TO 0 0615 33021-678900

RESIDENTIAL PROPERTIES OF WESTON LLC
C/O ZEBERSKY & PAYNE
4000 HOLLYWOOD BLVD STE. 400 NORTH
HOLLYWOOD FL 33021-6789

CR2E034 (7/03)

2. New Mailing Address

City, State, Zip

4. State/Country of Formation: FL

5. Date Organized or Qualified To Do Business in Florida: 09/30/2002

Principal Place of Business
C/O ZEBERSKY & PAYNE
4000 HOLLYWOOD BLVD STE. 400 NORTH
HOLLYWOOD FL 33021

3. New Principal Place of Business Address

City, State, Zip

6. FEI Number ☐ 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**

PAYNE, TODD S
C/O ZEBERSKY & PAYNE
4000 HOLLYWOOD BLVD STE. 400 NORTH
HOLLYWOOD FL 33021

9. **Name and Address of New Registered Agent**

Name

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

900024080959
10/24/03--01021--003 **150.00

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 Todd S. Payne SIGNATURE REQUIRED Date 10/21/03

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
	Todd S. Payne, Manager	4000 Hollywood Blvd. #400-N. Hollywood, FL 33021	Hollywood, FL 33021

REINSTATEMENT

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/Manage Todd S. Payne SIGNATURE REQUIRED as an authorized representative Date 10/21/03 Daytime Phone # (954) 989-6333

Typed or printed name of signing Managing Member/Manager Todd S. Payne, Manager

ZEBERSKY & PAYNE, LLP

December 30, 2003

VIA FEDERAL EXPRESS
Division of Corporations
Registration Section
P. O. Box 6327
Tallahassee, FL 32314-6327

Re: Residential Properties of Weston, LLC
Document Number L02000025598

Dear Sir or Madam:

This letter is in response to your Letter Number 203A00059293. I am returning the Application for Reinstatement for the above-referenced entity and have indicated the name of a Manager, as requested. We have previously provided you with our firm check for the fee in the amount of $150.00.

Thank you for your prompt attention to this filing. If you have any questions, please contact me.

Very truly yours,

Todd S. Payne
For the Firm

TSP:cm
Enclosure

Presidential Circle • 4000 Hollywood Blvd., Suite 400 North, Hollywood, Florida 33021
954-989-6333 • Fax: 954-989-7781 • www.zpklaw.com