

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 AUG -2 11 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # W02 000026524

1. Limited Liability Company's Name

MOREHOPE ASSOCIATES LLC

2. Principal Office Address

3388 PINETREE ST

Suite, Apt. #, etc.

City & State

Port Charlotte FL

Zip

33952

Country

USA

3. Mailing Office Address

3388 PINETREE ST

Suite, Apt. #, etc.

City & State

Port Charlotte FL

Zip

33952

Country

USA

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

OCT 8, 2002

6. FEI Number

16-1635761

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

PETER WESTFIELD

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

3388 PINETREE ST

Suite, Apt. #, Etc.

City

Port Charlotte

State

FL

Zip Code

33952

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

Peter Westfield

REGISTERED AGENT MUST SIGN

Date 7-28-04

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
MGRM	PETER WESTFIELD	3388 PINETREE ST	Port Charlotte FL 33952

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

Peter Westfield

Date 7-28-04

Daytime Phone # 941-743-0094