

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2004 MAY 20 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT# LO2000029712

1. Limited Liability Company's Name

Brave Property Management

2. Principal Office Address

12545 Lake Denise Blvd

Suite, Apt. #, etc.

City & State

Clermont, FL

Zip

34711

Country

USA

3. Mailing Office Address

12545 Lake Denise Blvd

Suite, Apt. #, etc.

City & State

Clermont FL

Zip

34711

Country

USA

4. State/Country of Formation

Florida, USA

5. Date Organized or Qualified
To Do Business in Florida

11-06-02

6. FEI Number

43-2022422

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a Certificate of Status

300032012973
05/25/04--01070--010 **50.00

8. Name and Address of Current Registered Agent

Name

Davis Lee Lowery

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

12545 Lake Denise Blvd.

Suite, Apt. #, Etc.

City

Clermont

State

FL

Zip Code

34711

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

Date

5-31-04

REGISTERED AGENT MUST SIGN

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	Davis L. Lowery	12545 Lake Denise Blvd	Clermont, FL

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

Date 5-31-04

Daytime Phone#

321-231-9394
352-242-2080

Typed or printed name of signing Managing Member/Manager

Davis L. Lowery

CR2E041 (10/02)