

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVAL
FILED

04 MAY 28 PM 4:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY
COMPANY
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02000029940

1. Limited Liability Company's Name
DeLisle Properties LLC

2. Principal Office Address
232 South Dillard Street

Suite, Apt. #, etc.

City & State
Winter Garden, FL

Zip Country
34787 USA

3. Mailing Office Address
232 South Dillard Street

Suite, Apt. #, etc.

City & State
Winter Garden, FL

Zip Country
34787 USA

4. State/Country of Formation
Florida, USA

5. Date Organized or Qualified
To Do Business in Florida 11-08-2002

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

Name
Steven A. DeLisle

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

Suite, Apt. #, Etc.

City
Winter Garden

State
FL

Zip Code
34787

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

REGISTERED AGENT MUST SIGN

Date 4/27/04

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
Mgr	Steven A. DeLisle	232 South Dillard Street	Winter Garden, FL 34787

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06/01/04--01021--001 **50.00

REINSTATEMENT

2003-
2004

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 4/27/04

Daytime Phone # 407-395-0001

Typed or printed name of signing Managing Member/Manager Steven A. DeLisle

CR2E041 (10/02)