

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

L02000033857

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAR -9 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000033857

1. Limited Liability Company's Name

TB CONDOMINIUM INVESTMENTS, LLC

03

BK

2. Principal Office Address

2 Alhambra Plaza

Suite, Apt. #, etc.

Suite 1202

City & State

Coral Gables, FL

Zip

33134

Country

USA

3. Mailing Office Address

2 Alhambra Plaza

Suite, Apt. #, etc.

Suite 1202

City & State

Coral Gables, FL

Zip

33134

Country

USA

4. State/Country of Formation

FLORIDA

**5. Date Organized or Qualified
To Do Business in Florida**

12/17/02

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

Alhambra Registered Agents, Inc.

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

2 Alhambra Plaza

Suite, Apt. #, Etc.

Suite 1202

City

Coral Gables

State

FL

Zip Code

33134

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

Mark Lerner, V.P.

Date March 8, 2004

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
MGR	Tommaso Berger	100 South Pointe Drive, #1406	Miami Beach, FL 33139

100030120431

REINSTATEMENT 2003-2004

BK

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

Tommaso Berger

Date 3/8/04

Daytime Phone # 305-445-3545

Typed or printed name of signing Managing Member/Manager Tommaso Berger

CR2E041 (10/02)



CORPORATION SERVICE COMPANY™

L 02 000033857

ACCOUNT NO. : 072100000032

REFERENCE : 483255 121767A

AUTHORIZATION

COST LIMIT : \$ 200.00

Patricia Pink

ORDER DATE : March 9, 2004

ORDER TIME : 10:51 AM

ORDER NO. : 483255-010

CUSTOMER NO: 121767A

CUSTOMER: Linda Kerr
Karp & Genauer, P.a.
Suite 1202
2 Alhambra Plaza
Coral Gables, FL 33134

DOMESTIC FILINGS

FILED
04 MAR -91 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME: TB CONDOMINIUM INVESTMENTS,
LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan

EXAMINER'S INITIALS

RECEIVED