

L02000034474

1082

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC -2 AM 10:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L02000034474
Name and Mailing Address

0010670 01 AT 0.292 **AUTO T9 0 0615 34228-161032
FAYE CASWELL DESIGN, LLC
732 EMERALD HARBOR DR.
LONGBOAT KEY FL 34228-1610



2. New Mailing Address 731 EMERALD HARBOR DR.		4. State/Country of Formation FL	
City, State, Zip LONGBOAT KEY, FL. 34228		5. Date Organized or Qualified To Do Business in Florida 12/20/2002	
Principal Place of Business 732 EMERALD HARBOR DR. LONGBOAT KEY FL 34228	3. New Principal Place of Business Address 731 EMERALD HARBOR DR.	6. FEI Number 59-1150715	Applied For Not Applicable
City, State, Zip LONGBOAT KEY, FL. 34228		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

CR2E084 (7/03)

8. Name and Address of Current Registered Agent CASWELL, FAYE H 732 EMERALD HARBOR DR. LONGBOAT KEY FL 34228	9. Name and Address of New Registered Agent Name CASWELL, FAYE H. Street Address (P.O. Box Number is Not Acceptable) 731 EMERALD HARBOR DR. City LONGBOAT, KEY FL Zip Code 34228
--	---

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 *Jaye Caswell* **REGISTERED AGENT MUST SIGN** Date 11/24/03

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
MGRM	CASWELL, FAYE H	732 731 EMERALD HARBOR DR.	LONGBOAT KEY FL 34228
MGRM	CASWELL, PAUL H	732 731 EMERALD HARBOR DR.	LONGBOAT KEY FL 34228
000025164134 12/02/03--01061--003 **\$0.00			
REINSTATEMENT 2003 <i>12/10/03</i>			

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/Manager *Jaye Caswell* Date 11/24/03 Daytime Phone # (941) 383-8060

Typed or printed name of signing Managing Member/Manager **FAYE H. CASWELL**

2 of 2

Faye Caswell
731 Emerald Harbor Dr.
Longboat Key, FL 34228

FILED
941383-8668

Faye Caswell Design, LLC 03 DEC -2 AM 10: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 25, 2003

Florida Department of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL. 32314

Dear Sir or Madam:

I recently received a notice about dissolving my LLC due to failure to respond to letters from the state. Unfortunately, I had not received any letters from the state due to the fact that the address was incorrect in the system. Our postal delivery person was kind enough to get me the latest letter as they had become familiar with our name. I immediately called and was informed to write this letter explaining the incorrect address and to include the original \$50 needed by the state. Enclosed, you will find the check and the completed paperwork. Please let me know if there is anything else you need.

Thank You,



Faye H. Caswell
President
Faye Caswell Design, LLC.

