

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L03000000690

1. Limited Liability Company's Name

2001 LLC

2. Principal Office Address - No P.O. Box #

2001-2011 NE 167 St.

Suite, Apt. #, etc.

3. Mailing Office Address

14411 Commerce Way

Suite, Apt. #, etc.

320

City & State

North Miami Beach

City & State

MIAMI, FL

Zip

33162

Country

USA

Zip

33016

Country

USA

8. Name and Address of Current Registered Agent

Name

Lynda V. Harris

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

14411 Commerce Way

Apt. #, Etc.

320

City

Miami

State

FL

Zip Code

33016

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 4/27/17

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representative/ Manager	City / State / Zip
MGR	Lynda V. Harris	14411 Commerce Way, Ste. 320	Miami/FL/33016
MGR	Robert Henderson	14411 Commerce Way, Ste. 320	Miami/FL/33016

T HENDERSON
MAY 04 2017

11. E-mail Address: lynda@lyndavharris.com

(To be used for future annual report notifications)

12. I certify that I am an authorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement of section 605.0012, 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Signature of authorized representative/member

Lynda V. Harris

Date

4/27/17

Daytime Phone #

954.559.9816

Typed or printed name of signing authorized representative/member Lynda V. Harris

FILED

17 MAY -3 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800298832898
05/03/17--01023--001 **1348.75

CR2E041 (1/14)



KYMBERLEE CURRY SMITH, P.A.
LEGAL & TITLE SERVICES

VIA UPS DELIVERY

April 28, 2017

Division of Corporations
Department of State
c/o Tanya Henderson
2661 Executive Center Cir.
Tallahassee, FL 32301

Re: Reinstatement of 2001 LLC -L03000000690

Property Address: 2001 N.E. 167 St., Miami, FL

Dear Tanya,

Please be advised that I have filed for the dissolution of 2001 Florida LLC, so that the name can be made available after the reinstatement and amendment of and for the above referenced LLC. I will not revoke the dissolution of 2001 Florida LLC, L12000031423.

Thank you for all of your assistance in this matter.

Should you have any questions or concerns, please do not hesitate to contact our office.

Lynda V. Harris