

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED

13 DEC 11 7:13

SECRETARY OF STATE PALM HARBOR, FLORIDA

DOCUMENT # L03000013976

1. Limited Liability Company's Name GRAND BELLA, LLC

CR2E041 (1/11)

2. Principal Office Address - No P.O. Box # 505 1st Avenue South

3. Mailing Office Address 515 1st Avenue South

4. State/Country of Formation Florida/Pinellas

Suite, Apt. #, etc.

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5. Date Organized or Qualified To Do Business in Florida 04/18/2003

City & State Tierra Verde, FL

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6. FEI Number 55-0827172

Applied For Not Applicable

Zip Country 33715 USA

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7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name ALAN S. GASSMAN

Street Address (P.O. Box Number is Not Acceptable) 1245 Court Street

Suite, Apt. #, Etc. Suite 102

City Clearwater

State Zip Code FL 33756

E-mail Address:

900254638799 12/11/13--01027--016 **2420.00

rnashed1@tampabay.rr.com

(To be used for future annual report notices)

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

[Handwritten Signature]

REGISTERED AGENT MUST SIGN

Date 11/26/13

10. Names and Street Addresses of Managing Members/Managers

Table with 4 columns: Titles, Name of Managing Members/Managers, Street Address of Each Managing Member/Manager, City / State / Zip. Row 1: MGR, RAMSES S. NASHED, 505 1st Avenue South, Tierra Verde, FL 33715. Includes 'REINSTATEMENT' stamp and '\$ 1210.00' fee.

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.

Signature of Managing Member/Manager

[Handwritten Signature]

Date 11/13/13

Daytime Phone # 714-418-6622

Typed or printed name of signing Managing Member/Manager