

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

2008 APR 23 P 4: 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03252008 REIN-LLC CR2E101 (1/07)

4. FEI Number **59-3686286** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

D'HULSTER, STACEY
6196 126TH AVE. N.
LARGO, FL 33773

Name **GERALD D'HULSTER**
Street Address (P.O. Box Number is Not Acceptable)
6196 126TH AVE NORTH
City **Largo** FL Zip Code **33773**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **GERALD D'HULSTER** DATE **4-15-08**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$377.50

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGRM** ☒ Delete
NAME **D'HULSTER, STACEY**
STREET ADDRESS **6196 126TH AVE. N.**
CITY-ST-ZIP **LARGO, FL 33773**

☐ Change ☐ Addition
200125143352
04/23/08--01002--010 **377.50

TITLE **MGRM** ☐ Delete
NAME **D'HULSTER, GERALD**
STREET ADDRESS **6196 126TH AVE. N.**
CITY-ST-ZIP **LARGO, FL 33773**

☐ Change ☐ Addition

TITLE ☐ Delete
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REINSTATEMENT 07-08

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* **GERALD D'HULSTER** DATE **4-15-08** (727) **587-2681**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #