

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 DEC 15 AM 9:17

DOCUMENT # L03 000019606

1. Corporation Name

Verde Properties, LLC

2. Principal Office Address

2862 SW 127 Ave
Suite, Apt. #, etc.

City & State

Miramar, FL

Zip

33027

Country

3. Mailing Office Address

2862 SW 127 Ave
Suite, Apt. #, etc.

City & State

Miramar, FL

Zip

33027

Country

CR2E081 (8/05)

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

33-1059714

Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Martine Louis-Jacques

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

2862 SW 127 Ave

Suite, Apt. #, Etc.

City

Miramar

State

FL

Zip Code

33027

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Martine Louis-Jacques

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|----------|--------------------------------------|--|--------------------------|
| <u>M</u> | <u>Martine Louis Jacques</u> | <u>2862 SW 127 Ave</u> <u>Miramar, FL 33027</u> | <u>Miramar, FL 33027</u> |
| <u>M</u> | <u>Jean Claude Verdier</u> | <u>2862 SW 127 Ave</u> <u>Miramar, FL 33027</u> | <u>Miramar, FL 33027</u> |
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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. 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:

Martine Louis-Jacques

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #