PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 NOV -9 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L03000023616

1. Limited Liability Company's Name
KARLY-HOMES LLC

2. Principal Office Address	3. Mailing Office Address
1901 WOOD BROOK ST	1901 WOOD BROOK ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: TARPON SPRINGS, FL	City & State: TARPON SPRINGS, FL
Zip: 34689-7515 Country:	Zip: 34689-7515 Country:

4. State/Country of Formation: FL

5. Date Organized or Qualified To Do Business in Florida: JUNE 27, 2003

6. FEI Number: 56-2371189 ☐ Applied For ☐ Not Applicable

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

8. Name and Address of Current Registered Agent

Name: ALBERT F SERRA

Street Address (P.O. Box Number Is Not Acceptable): 1901 WOOD BROOK ST

Suite, Apt. #, Etc.:

City: TARPON SPRINGS State: FL Zip Code: 34689-7515

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: Albert F. Serra
REGISTERED AGENT MUST SIGN

Date: NOVEMBER 4, 2004

CR2E041 (10/02)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	ALBERT F SERRA	1901 WOOD BROOK ST	TARPON SPRINGS, FL 34689-7515

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REINSTATEMENT

11. I certify that I am managing member/manager or the registered agent of the limited liability company as required 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: Albert F. Serra Date: 11/04/2004 Daytime Phone #: 727-235-2379

Typed or printed name of signing Managing Member/Manager: ALBERT F SERRA