


L03000026028

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| | | | |
|---|--|--|--|
| LIMITED LIABILITY COMPANY REINSTATEMENT  | | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS | |
| DOCUMENT # L03000026028 1. Limited Liability Company's Name LEGENDS LAND GROUP, L.L.C. | | | |
| 2. Principal Office Address 135 Professional Drive Suite, Apt. 4, etc. Suite 101 City & State Ponte Vedra Beach FL Zip 32082 | | 3. Mailing Office Address 135 Professional Drive Suite, Apt. #, etc. Suite 101 City & State Ponte VEdra Beach FL Zip 32082 | |
| | | 4. State/Country of Formation FLORIDA | |
| | | 5. Date Organized or Qualified To Do Business in Florida 7/16/03 | |
| | | 6. FEI Number 20-0183132 | |
| | | Applied For <input type="checkbox"/> Not Applicable | |
| | | 7. <input checked="" type="checkbox"/> CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional fee required for a Certificate of Status | |

FILED
 04 OCT - 7 AM 9:39
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

BK

8. Name and Address of Current Registered Agent

Name: Baron L. Bartlett, Esq.

Street Address (P.O. Box Number is Not Acceptable): 135 Professional Drive, Suite 101

Suite, Apt. #, Etc.: Suite 101

City: Ponte Vedra Beach State: FL Zip Code: 32082

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: [Signature] Date: 10/7/04

REGISTERED AGENT MUST SIGN

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 |
|--|-----------------------------------|--|---------------------------------------|
| <u>MEM</u> | <u>Bradley E. Gilbert</u> | <u>135 Professional Dr. Suite</u> | <u>101 Ponte VEdra Beach FL 32082</u> |
| <u>MEM</u> | <u>Baron L. Bartlett</u> | <u>135 Professional Dr. Suite</u> | <u>101 Ponte Vedra Beach FL 32082</u> |
| | | | <u>10/14/04 --01006--002 **\$5.00</u> |
| REINSTATEMENT 2004 <u>(CERT)</u> | | | |

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. 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: [Signature] Date: 10/7/04 Daytime Phone # 904/285-5299

Typed or printed name of signing Managing Member/Manager: BARON L. BARTLETT

L03006026028
BARTLETT & DEAL, P.A.
ATTORNEYS AND COUNSELORS AT LAW

BARON L. BARTLETT, ESQUIRE
BLAKE F. DEAL III, ESQUIRE
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MAIN OFFICE:
135 Professional Drive, Suite 101
Ponte Vedra Beach, FL 32082
TEL. (904) 285-5299
FACSIMILE (904) 285-1640
 MANDARIN OFFICE:
3121 Venture Place, Suite 4
Jacksonville, FL 32257
TEL. (904) 288-7727
FACSIMILE (904) 288-7848
INTERNET www.jaxrelaw.com

MANDARIN OFFICE MANAGER:
LORI SABATO, LSabato@jaxrelaw.com

October 7, 2004

VIA FACSIMILE

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

FILED
OCT - 7 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: LEGENDS LAND GROUP, L.L.C.

Dear Sir or Madam:

The above referenced entity did not receive its annual renewal card due to a move of their business office. We are enclosing the signed renewal form and request your reinstatement as soon as possible and fax me notification of same.

Thank you for your assistance and please call me if you have any questions.

Sincerely

BARON L. BARTLETT

BLB/nb
Enclosures