

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L03000042249

1. Limited Liability Company's Name

THIRD AND NINTH ABOVE THE GROUND, LLC

2. Principal Office Address

1815 Cordova Rd.

Suite, Apt. #, etc.

210

City & State

Ft. Lauderdale, FL

Zip

33316

Country

Broward

3. Mailing Office Address

1815 Cordova Rd.

Suite, Apt. #, etc.

210

City & State

Ft. Lauderdale, FL

Zip

33316

Country

Broward

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

10/31/2003

6. FEI Number

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

Jeffrey B. Smith

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

1401 E. Broward Blvd.

Suite, Apt. #, Etc.

206

City

Ft. Lauderdale

State

FL

Zip Code

33301

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

REGISTERED AGENT MUST SIGN

Date

1-17-06

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
Mgr	Loos, John T.	1815 S. Cordova Rd., 210	Ft. Lauderdale, FL 33316
Mgr	Herman, Peter G.	1815 S. Cordova Rd., 210	Ft. Lauderdale, FL 33316

REINSTATEMENT 2004-2006

700065013437

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

Date 1/17/06

Daytime Phone # 954-462-7806

Typed or printed name of signing Managing Member/Manager

KELLEY, HERMAN & SMITH
LAWYERS

PATRICK G. KELLEY
BRUCE K. HERMAN
JEFFREY B. SMITH

SUITE 206
1401 EAST BROWARD BOULEVARD
FORT LAUDERDALE, FLORIDA 33301
AREA CODE 954
TELEPHONE 462-7806
TELEFAX 522-0396
E-Mail: ccarlsen@khsatty.com

January 17, 2006

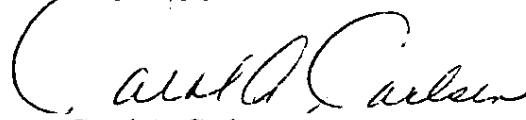
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Third and Ninth Above the Ground, LLC

Dear Sirs:

Enclosed please find the Reinstatement Form for the referenced corporation, together with our check in the amount of \$150.00, the fee for 2004, 2005 and 2006. Please be advised that we did not receive the Annual Report. The correct mailing address is 1815 Cordova Road, #210, Ft. Lauderdale, FL 33316

Very truly yours,



Carol A. Carlsen
Legal Assistant

/cc
Enclosures

FILED
2006 JAN 19 PM 3:39
TALLAHASSEE, FLORIDA
SECRETARY OF STATE