

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JAN 10 AM 10:32

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

LO3000052379

1. Limited Liability Company's Name

B & L Land Developers, LLC

500063960685
01/18/06--01039--009 **150.00

CR2E041 (8/05)

2. Principal Office Address

131 W. Deer Run

3. Mailing Office Address

131 W. Deer Run

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DeFuniak Spgs., FL

City & State

DeFuniak Spgs., FL

Zip

32435

Country

U.S.

Zip

32435

Country

U.S.

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

12/11/2003

6. FEI Number

52-2420606

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

Gerard C. Lawrenz

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

131 W. Deer Run

Suite, Apt. #, Etc.

City

DeFuniak Spgs.

State

FL

Zip Code

32435

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]
REGISTERED AGENT MUST SIGN

Date

1-6-06

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	Gerard C. Lawrenz	131 W. Deer Run	DeFuniak Spgs., FL 32435

REINSTATEMENT 04-06

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

1-6-06

Daytime Phone #

850-892-2252

Typed or printed name of signing Managing Member/Manager

Gerard C. Lawrenz

DAVID R. JOHNSON, C.P.A.

1265 HWY 331 S
DEFUNIAK SPRINGS, FL 32435
PH : (850) 892-2752
FAX : (850) 892-5624

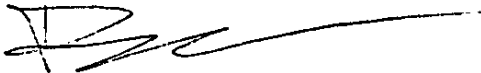
January 5, 2006

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

To Whom It May Concern:

Our client B & L Land Developers, LLC had sent in documents to change the effective date of their LLC. After to speaking with you he thought everything had been taken care of. He is sending in \$150.00 for his annual report. There is also a late fee of \$100.00 that he is asking to be waived. He never received a notice for the annual report. Please let him know what he needs to do.

Sincerely,

A handwritten signature in black ink, appearing to be 'DRJ', followed by a long horizontal line.

David R. Johnson, CPA

DRJ/ak