بدا PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. LIMITED LIABILITY FLORIDA DEPARTMENT OF STATE 09 NOV 12 PM 3: 05 COMPANY Secretary of State REINSTATEMENT **DIVISION OF CORPORATIONS** .03000052538 BMATBlock 55 LLC 100145686941 03/12/09--01046--004 **277.50 CR2E041 (10/08) 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address 490 Sawarass Corp. Parkway 490 Sawgrass Corp. Parkway sulto. Apr. #, old. 4. State/Country of Formation FLURIDA Sulte, Apt. #, etc. 5. Date Organized or Qualified To Do Business in Florida 310 310 City & State City & State 6. FEI Number Sunrise, Florida PANFISE Not Applicable CERTIFICATE OF STATUS DESIRED ろろろみち USA 8. Name and Address of Current Registered Agent A \$100 reinstatement fee is imposed, except Gutta CPA rrank in circumstances which the entity did not Street Address (P.O. Box Number is Not Acceptable) receive the prior notices. By checking this box, you are certifying the prior notices were Suite, Apt. #, Etc. not received and requesting the \$100 reinstatement be waived 100145686941 Zip Code FL <u> まとけの</u>ば 33325 11/02/09--01063--011 9. I, being appointed the registered agent of the above nagraid, limited liability company, with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent 3/4/09 REGISTERED AGENT MUST SIGN 10. Names and Street Addresses of Managing Members/Managers Street Address of Each Managing Member/Manage Name of Managing Members/Managers City / State / Zio MGR PUNTISE. S. HAWKES 11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided to 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 jubility-company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect eve been paid. The information indicated on this Signature of Managing M onuran Typed or printed name of signing Managing Member/Manager

S. HAWKES

NOV 1 3 2009

EXAMINER





FLORIDA DEPARTMENT OF STATE Division of Corporations

November 5, 2009

DBM AT BLOCK 55, LLC 490 SAQGRASS CORP PARKWAY 310 SUNRISE, FL 33325

SUBJECT: DBM AT BLOCK 55, LLC

Ref. Number: L03000052538

We have received your document for DBM AT BLOCK 55, LLC and your check(s) totaling \$138.75. However, the enclosed document has not been filed and is being returned for completion of the enclosed affidavit as well as the following correction(s).

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2007 through 2009;and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$277.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 309A00034887

Suzanne Hawkes Regulatory Specialist II

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FLORIDA DEPARTMENT OF STATE . Division of Corporations

March 19, 2009

DBM AT BLOCK 55 LLC 490 SAWGRASS CORP PARKWAY 310 SUNRISE, FL 33325

SUBJECT: DBM AT BLOCK 55, LLC Ref. Number: L03000052538

We have received your document for DBM AT BLOCK 55, LLC and your check(s) totaling \$277.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2007 through 2009; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$416.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 809A00009391