

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

05 JAN -7 PM 2:18

SECRETARY OF STATE
TALLAHASSEE FLORIDA

17



11012004 REIN-LLC CR2E101 (6/04)

4. FEI Number: ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, RONALD D
11345 EDISON AVE
NEW PORT RICHEY, FL 34654

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Ronald D Johnson LLC* 1-3-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2005, Fee will be \$200.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME JOHNSON, RONALD D
STREET ADDRESS 11345 EDISON AVE.
CITY-ST-ZIP NEW PORT RICHEY, FL 34654

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
Ronald D. Johnson LLC

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME 300043365483
STREET ADDRESS 12/13/04--01059--009 **155.00
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE *Ronald D Johnson LLC* 12-10-04 727-389-9080
Signature AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #