

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 DEC 19 AM 10:55

DOCUMENT # L04000003044

1. Limited Liability Company's Name

PRINCETON HOLDINGS LLC

CR2E041 (8/05)

2. Principal Office Address
222 Lakeview Avenue

Suite, Apt. #, etc.

#950

City & State

West Palm Beach, FL

Zip
33401

Country
U.S.A.

3. Mailing Office Address
222 Lakeview Avenue

Suite, Apt. #, etc.

#950

City & State

West Palm Beach, FL

Zip
33401

Country
U.S.A.

4. State/Country of Formation
Florida/U.S.A.

5. Date Organized or Qualified
To Do Business in Florida

1/09/2004

6. FEI Number
20-5938005

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

Ronald S. Kochman

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

222 Lakeview Avenue

Suite, Apt. #, Etc.

#950

City

West Palm Beach

State
FL

Zip Code
33401

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

Date

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
MGR	Eric S. Smith	222 Lakeview Avenue, #950	West Palm Beach, FL 33401

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 12/24/06

Daytime Phone #

Typed or printed name of signing Managing Member/Manager

Eric S. Smith