

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

11 APR 20 PM 2:18

DOCUMENT # L04000011744

1. Limited Liability Company's Name

1925 CALAIS DRIVE, LLC

CR2E041 (1/11)

2. Principal Office Address - No P.O. Box # 120 NE 25TH STREET		3. Mailing Office Address 120 NE 25TH STREET	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33137-4835	Country USA	Zip 33137-4835	Country USA

4. State/Country of Formation FLOIRDA	
5. Date Organized or Qualified To Do Business in Florida 2/12/2004	
6. FEI Number 34-1978412	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent	
Name DONALD S. VERNON, JR	
Street Address (P.O. Box Number is Not Acceptable) 120 NE 25TH STREET	
Suite, Apt. #, Etc.	
City MIAMI	State FL
Zip Code 33137	

E-mail Address:
200203161292
04/20/11--01008--021 **1021.25
LAW16900@EARTHLINK.NET
(To be used for future annual report notices)

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

4/19/11

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
MGRM	DONALD S. VERNON, JR	120 NE 25TH STREET	MIAMI, FL 33137
P	DONALD S. VERNON, JR	120 NE 25TH STREET	MIAMI, FL 33137

REINSTATEMENT 2008-2011

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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing
Member/Manager

Date 4/19/2011

Daytime Phone # 305 987-8427

Typed or printed name of signing Managing Member/Manager DONALD S. VERNON, JR.

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

RECEIVED
11 APR 20 PM 1:33
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. 1925 CALAIS DRIVE, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
<input checked="" type="checkbox"/>	Reinstatement
	Trademark
	Other

Examiner's Initials