

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FILED

13 JAN 29 AM 10: 19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L04000017966

FED LAND PARTNERS, LLC

22 Banyan Rd.

135 DAWSON CIR

Sewalls Pt. FL

STATEN Island, NY

34996

USA

10314

USA

Country of Formation
FL - USA

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20-0822501

Not Applicable

**\$5.00 Additional Fee required
for a Certificate of Status**

Joe VALKO

Address (P.O. Box Number is Not Acceptable) 22 BANYON RD

Sewalls PT

Zip Code _____

FL

4996

900244144289
01/29/13--01019--010 **1071.25

Frank D 410@GMAIL, Com
(To be used for future annual report notices)

**Signature of
Registered Agent**

Date _____

REGISTERED AGENT MUST SIGN

Name of
Managing Members/ Managers**Street Address of Each
Managing Member/Manager**

City / State / Zip

Mgr. Frank DeSantis

135 Dawson cndle

STATEN ISLAND, NY 10314

FEB 01 2013

T. SCOTT

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 _____

1/21/13

Daytime Phone #

718 344 9225

Typed or printed name of signing Managing Member/Manager