

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **L04000042591**

1. Limited Liability Company's Name  
**609 NE 8TH AVENUE, LLC**

2. Principal Office Address - No P.O. Box #  
**1408 S. Andrews Avenue**

Suite, Apt. #, etc.  
**c/o Casey W. Mills PA**

City & State  
**FORT LAUDERDALE FL**

Zip Country  
**33316 US**

3. Mailing Office Address  
**1408 S. Andrews Avenue**

Suite, Apt. #, etc.  
**c/o Casey W. Mills PA**

City & State  
**FORT LAUDERDALE FL**

Zip Country  
**33316 US**

4. State/Country of Formation

5. Date Organized or Qualified  
To Do Business in Florida  
08/07/2004

6. FEI Number ☐ Applied For  
☒ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒ \$5.00 Additional Fee required  
for a Certificate of Status

CR2E041 (1/14)

14 APR -9 PM 12:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8. Name and Address of Current Registered Agent

Name  
**Casey W. Mills, Esq.**  
Street Address (P.O. Box Number is Not Acceptable)  
**1408 S. Andrews Avenue**  
Suite, Apt. #, Etc.

City State Zip Code  
**Fort Lauderdale FL 33316**

600258828656  
04/09/14--01007--024 \*\*1353.75

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of  
Registered Agent

*Casey W. Mills*

REGISTERED AGENT MUST SIGN

Date **April 3, 2014**

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representative/ Manager	City / State / Zip
	CASEY W. MILLS AS	1408 S. Andrews Avenue	FORT LAUDERDALE, FL 33316
	PERSONAL REPRESENTATIVE		
	OF THE ESTATE OF		
MGR	ROBERT E. MORRIS JR.		

REINSTATEMENT

2006-2014

11. E-mail Address: **caseywmills@aol.com**

(To be used for future annual report notifications)

12. I certify that I am an authorized representative/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 605.0012, 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 to the Department of State constitutes a third degree felony as provided in s. 817.155, F.S.

Signature of  
Authorized Representative/Manager

*Casey W. Mills*

Date **April 3, 2014** Daytime Phone # **954-763-7550**

Typed or printed name of signing Authorized Representative/Manager **CASEY W. MILLS AS PERSONAL REPRESENTATIVE OF THE ESTATE OF ROBERT E. MORRIS JR.**

IN THE CIRCUIT COURT OF THE  
17<sup>TH</sup> JUDICIAL CIRCUIT, IN AND FOR  
BROWARD COUNTY, FLORIDA

IN RE: ESTATE OF

ROBERT E. MORRIS JR.

DECEASED.

PROBATE DIVISION-FILE NO. PRC-14-0001139  
DIV: 61J - JUDGE CHARLES M. GREENE

PROBATE  
14 MAR 25 PM 2:24  
FILED FOR RECORD  
CLERK, CIRCUIT COURT  
BROWARD COUNTY, FL

LETTERS OF ADMINISTRATION

TO ALL WHOM IT MAY CONCERN:

WHEREAS, Robert E. Morris, Jr., a resident of Arlington County, Virginia, died on December 29, 2013, owning assets in the State of Florida, and

WHEREAS, Casey W. Mills has been appointed Personal Representative of the estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in this estate,

NOW THEREFORE, I, the undersigned Circuit Judge, declare Casey W. Mills to be duly qualified under the laws of the State of Florida to act as Personal Representative of the Estate of Robert E. Morris, Jr., deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

WITNESS my hand and seal of this Court, this 25th day of March, 2014.

CIRCUIT COURT JUDGE

14 APR -9 PM 12:08

CLERK OF STATE  
TALLAHASSEE, FLORIDA

STATE OF FLORIDA  
BROWARD COUNTY  
I DO HEREBY CERTIFY the within and foregoing is a true  
and correct copy of the original as it appears on record  
and file in the office of the Circuit Court Clerk of Broward  
County, Florida, and that same is in full force and effect  
WITNESS my hand and Official Seal at Fort Lauderdale  
Florida, this the 25 day of March 20 14  
Howard C. Forman  
Deputy Clerk

