

L04000049731

Florida Department of State
Division of Corporations
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**LIMITED LIABILITY REINSTATEMENT
PRINCE GEORGE'S STATION RETAIL, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$516.25

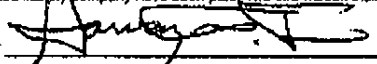
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LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS																																	
DOCUMENT # L04000049731 1. Limited Liability Company's Name PRINCE GEORGE'S STATION RETAIL, LLC																																			
2. Principal Office Address - No P.O. Box # 18851 NE 29TH AVE. Subh. Apt. #, etc. STE 767 City & State AVENTURA FL Zip 33180 Country US		3. Mailing Office Address 18851 NE 29TH AVE. Suite, Apt. #, etc. STE 767 City & State AVENTURA FL Zip 33180 Country US																																	
8. Name and Address of Current Registered Agent Name TAYLOR, HARVEY S Street Address (P.O. Box Number is Not Acceptable) 18851 NE 29TH AVE. Suite, Apt. #, Etc. STE 767 City AVENTURA State FL Zip Code 33180		4. State/Country of Formation US 5. Date Organized or Qualified To Do Business in Florida 07/02/2004 6. FEI Number ☐ Applied For ☒ Not Applicable 7. CERTIFICATE OF STATUS DESIRED ☐ \$5.00 Additional Fee required for a Certificate of Status																																	
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: 6/21/10 REGISTERED AGENT MUST SIGN																																			
10. Names and Street Addresses of Managing Members/Managers <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 10%;">Titles</th> <th style="width: 30%;">Name of Managing Member/Managers</th> <th style="width: 30%;">Street Address of Each Managing Member/Manager</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>TAYLOR, HARVEY S</td> <td>18851 NE 29TH AVE., STE 767</td> <td>AVENTURA FL 33180</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>				Titles	Name of Managing Member/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MGRM	TAYLOR, HARVEY S	18851 NE 29TH AVE., STE 767	AVENTURA FL 33180																								
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MGRM	TAYLOR, HARVEY S	18851 NE 29TH AVE., STE 767	AVENTURA FL 33180																																
REINSTATEMENT -08-10																																			
11. E-mail Address: harveytaylor@earthlink.net (To be used for future annual recon notifications)																																			
12. 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 608.408, 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: 6/21/10 Daytime Phone #: (305) 892-6800 Typed or printed name of signing Managing Member/Manager: HARVEY S. TAYLOR																																			

C.S.