

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

200.00
9-16-05

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 DEC 29 AM 8:04

DOCUMENT # **L04600052123**

1. Limited Liability Company's Name

C & K Artistry, LLC

2. Principal Office Address

156 BAYOU DR

Suite, Apt. #, etc.

3. Mailing Office Address

PO 1589 DESTIN FL

Suite, Apt. #, etc.

City & State

DESTIN, FL

City & State

DESTIN FL

Zip

32541

Country

OKALOOSA

Zip

32540

Country

OKALOOSA

CR2E041 (8/05)

4. State/Country of Formation

FL / OKALOOSA

5. Date Organized or Qualified
To Do Business in Florida

2004

6. FEI Number

611475355

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

CYNTHIA SUE KELLER

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

156 BAYOU DR

Suite, Apt. #, Etc.

City

DESTIN

State

FL

Zip Code

32541

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

Cynthia S Keller
REGISTERED AGENT MUST SIGN

Date **10/24/06**

12/20/06

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
owner	CYNTHIA SKELLER	156 BAYOU DR	DESTIN, FL 32541

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

Cynthia S Keller

Date

12/20/06

Daytime Phone

(850) 699-8213

Typed or printed name of signing Managing Member/Manager

(850) 654-7460