

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

06 OCT -9 AM 10:02

DOCUMENT # L04000054437

1. Limited Liability Company's Name

CCS Enterprises L.L.C.
7723 Deedra Circle
Port Richey, FL 34668

2. Principal Office Address

7723 Deedra Circle

Suite, Apt. #, etc.

City & State

Port Richey, FL

Zip
34668

Country
U.S.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip

Country

CR2E041 (8/05)

4. State/Country of Formation

U.S. Florida

5. Date Organized or Qualified
To Do Business in Florida

7-21-2004

6. FEI Number
81-0653311

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

Gerald E. Hack

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

7723 Deedra Circle

Suite, Apt. #, Etc.

City

Port Richey, FL

State
FL

Zip Code
34668

300080645613
10/10/06--01009--017 *150.00

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 10-06-2006

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MANAGER	Gerald E. Hack	7723 Deedra Circle	Port Richey, FL 34668

REINSTATEMENT 2006

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

Date 10-06-2006 Daytime Phone# 727-919-1525

Typed or printed name of signing Managing Member/Manager

GERALD E. HACK