PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
06 FEB -2 AM 10:40

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L04000056505

1. Limited Liability Company's Name
Florida Property Investments, LLC

300065832123
02/14/06--01034--023 **100.00

CR2E041 (8/05)

2. Principal Office Address	3. Mailing Office Address
342 Grey Owl Run	P.O. Box 621714
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Chuluota, FL	City & State: Oviedo, FL
Zip: 32766 Country: USA	Zip: 32762-1714 Country: USA

4. State/Country of Formation: USA

5. Date Organized or Qualified To Do Business in Florida: 7-29-2004

6. FEI Number: 20-1984001 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

8. Name and Address of Current Registered Agent

Name: Russell K. Dickson JR
Street Address (P.O. Box Number is Not Acceptable): 20 North Orange Avenue
Suite, Apt. #, Etc.: Suite 1100
City: Orlando State: FL Zip Code: 32801

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: _____
REGISTERED AGENT MUST SIGN

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
MGR	Zoila D. Sera Fino	342 Grey Owl Run	Chuluota, FL 32766
MGRM	Anthony D. Sera Fino Sr.	342 Grey Owl Run	Chuluota, FL 32766

REINSTATEMENT
05-06

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 608.408, 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: Zoila D'Sera Fino Date: 1-18-2006 Daytime Phone #: 407-366-3610

Typed or printed name of signing Managing Member/Manager: Zoila D. Sera Fino