

L04000059181

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 OCT -6 PM 2:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Limited Liability Company's Name

ORLANDO PROPERTIES UK LLC

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100080736557
10/11/06--01063--007 **205.00

2. Principal Office Address

3263 SOUTH JOHN
YOUNG PARKWAY

Suite, Apt. #, etc.

City & State KISSIMMEE, FL

Zip 34746

Country USA

3. Mailing Office Address

1 CHATHAM DRIVE

Suite, Apt. #, etc. PEMBROKE PARK

City & State PORTSMOUTH
HAMPSHIRE

Zip PO1 2TF

Country UK

4. State/Country of Formation

FLORIDA US

5. Date Organized or Qualified
To Do Business in Florida

8/10/04

6. FEI Number

20-1544750

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

THOMAS F. KERNEY

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

1420 E. CONCORD ST.

Suite, Apt. #, Etc.

City

ORLANDO

State
FL

Zip Code

32803

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

Thomas F. Kerney
REGISTERED AGENT MUST SIGN

Date 10/5/06

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
MGR	MARTIN SIMPSON	1 CHATHAM DRIVE PEMBROKE PARK	PORTSMOUTH HAMPSHIRE PO12TF UK
MGR	JOHN SIMPSON	1 CHATHAM DRIVE PEMBROKE PARK	PORTSMOUTH HAMPSHIRE PO12TF UK
MGR	PAULA SIMPSON	1 CHATHAM DRIVE PEMBROKE PARK	PORTSMOUTH HAMPSHIRE PO12TF UK
MGR	DIANNE SIMPSON	1 CHATHAM DRIVE PEMBROKE PARK	PORTSMOUTH HAMPSHIRE PO12TF UK

REINSTATEMENT 2005-2006

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

Martin Simpson

Date 9/25/06
25-9-06

Daytime Phone # (407) 898-5526

Typed or printed name of signing Managing Member/Manager

MARTIN SIMPSON