

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

TALLAHASSEE, FLORIDA

06 AUG 30 PM 12:48

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L04000066676**

1. Limited Liability Company's Name

WALNUT & MAIN, L.L.C.

CR2E041 (8/05)

2. Principal Office Address

601 S. MAIN ST.

Suite, Apt. #, etc.

3. Mailing Office Address

601 S. MAIN ST.

Suite, Apt. #, etc.

City & State

CRESTVIEW FL

Zip **32536** Country **USA**

City & State

CRESTVIEW FL

Zip **32536** Country **USA**

4. State/Country of Formation

FLORIDA / OKALOOSA

5. Date Organized or Qualified To Do Business in Florida

6. FEI Number

42-1660282

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

DONALD G. SIMMONS

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

601 S. MAIN ST.

Suite, Apt. #, Etc.

City

CRESTVIEW

State

FL

Zip Code

32536

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

[Signature]

Date

8/30/06

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
MGRM	DONALD G. SIMMONS	601 S. MAIN ST.	CRESTVIEW, FL 32536

REINSTATEMENT

05/06

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08/30/06--01039--021 **200.00

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

[Signature]

Date

8/30/06

Daytime Phone #

850 687-9132

Typed or printed name of signing Managing Member/Manager

DONALD G. SIMMONS