

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 NOV 28 AM 10:05

**DOCUMENT # L05000004058**

1. Limited Liability Company's Name

Florida ALC Holdings, LLC

CR2E041 (8/05)

2. Principal Office Address

19506 Pine Valley Dr.

Suite, Apt. #, etc.

City & State

Odessa, FL

Zip

33556

Country

USA

3. Mailing Office Address

PO Box 341694

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33694

Country

USA

4. State/Country of Formation

Florida - USA

5. Date Organized or Qualified  
To Do Business in Florida

1/13/05

6. FEI Number

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

David A. Banning, Jr.

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

5111 Ehrlich Road 500081389145  
10/31/06--01053--012 \*\*150.00

Suite, Apt. #, Etc.

Suite 119

City

Tampa

State

FL

Zip Code

33624

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

*David A. Banning, Jr.*  
REGISTERED AGENT MUST SIGN

Date 11-20-2006

**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	David A. Banning, Jr.	5111 Ehrlich Rd, #119	Tampa, FL 33624
Mgr	Gregory Bennett	19506 Pine Valley Dr.	Odessa, FL 33556

**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

*David A. Banning, Jr.*

Date 10-24-2006

Daytime Phone # 813-964-9700

Typed or printed name of signing Managing Member/Manager

David A. Banning, Jr.