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
10 FEB -2 PM 3:02

DOCUMENT # L05000007232

1. Limited Liability Company's Name
Peyton + Ashtyn, LLC

400167796504
02/02/10--01028--011 **416.25
CR2E041 (11/09)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
4473 Fox st	4473 Fox st
Suite, Apt. #, etc.	Suite, Apt. #, etc
City & State: Orlando FL	City & State: Orlando FL
Zip: 32814 Country: America	Zip: 32814 Country: America

4. State/Country of Formation: Florida/USA
5. Date Organized or Qualified To Do Business in Florida: 1/24/05
6. FEI Number: 20-2556182 ☐ Applied For ☐ Not Applicable
7. CERTIFICATE OF STATUS DESIRED ☐ $8.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent
Name: Sean Depasquale
Street Address (P.O. Box Number is Not Acceptable): 4473 Fox st
Suite, Apt. #, Etc
City: Orlando State: FL Zip Code: 32814

☑ A $100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the $100 reinstatement be waived.

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: Sean Depasquale (REGISTERED AGENT MUST SIGN) Date: 1/27/10

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	Sean Depasquale	4473 Fox st	Orlando FL 32814
MGRM	Kimberly Depasquale	4473 Fox st	Orlando FL 32814
	REINSTATEMENT 2008-2010		

11. E-mail Address: Sdmoney@Aol.com (To be used for future annual report notifications)

12. 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: Sean Depasquale Date: 1/27/10 Daytime Phone #: 407 620 9898

Typed or printed name of signing Managing Member/Manager

T. Hampton FEB - 3 2010

STANTON GASDICK

ATTORNEYS AT LAW

January 28, 2010

Via Federal Express Delivery

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Payton & Ashtyn, LLC / L05000007232 / Reinstatement

Dear Sir or Madam:

Enclosed is an application for reinstatement together with check number 1759 made payable to Secretary of State, Division of Corporations, in the amount of $416.25 to cover the cost of filing.

Please do not hesitate to contact this office should you have any questions regarding the enclosed.

Sincerely yours,

Michael J. Gasdick

MJG:ra

Enclosures (*as indicated*)

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390 NORTH ORANGE AVENUE, ANNEX SUITE 260, ORLANDO, FLORIDA 32801

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