

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L05000012104

1. Limited Liability Company's Name

Royal Family Child Care & Academy LLC
1440 N. Pine Hills Rd
Orlando, FL 32808

2. Principal Office Address - No P.O. Box #

1440 N. Pine Hills Rd

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Zip

32808

Country

Zip

Country

8. Name and Address of Current Registered Agent

Name

Jacqueline Ritchie

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

1440 N. Pine Hills Rd

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32808

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

1

REGISTERED AGENT MUST SIGN

Date

10/24/08

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	Jacqueline Ritchie	1440 N. Pine Hills Rd	Orlando, FL 32808
	QUINCY DUROSEAU	1440 N Pine Hills Rd	Orlando FL 32808
	S. HAWKES		500156177445 05/19/09--01035--020 **138.75
	JUN 24 2009		S. HAWKES
EXAMINER	REINSTATEMENT		MAY 28 2009
	2008-09		EXAMINER

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

Jacqueline Ritchie

Date

10/24/08

Daytime Phone #

407-690-6019

Typed or printed name of signing Managing Member/Manager

JACQUELINE RITCHE

FILED
09 JUN 23 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200157179432
06/15/09--01053--017 **100.00

CR2E041 (10/08)

08-09

4. State/Country of Formation

Florida

5. Date Organized or Qualified To Do Business in Florida

02/04/2005

6. FEI Number

41-2053121

Applied For

Not Applicable

7.

CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required for a Certificate of Status

☐ 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.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 28, 2009

ROYAL FAMILY CHILD CARE & ACADEMY LLC
1440 N PINE HILLS RD
ORLANDO, FL 32808

SUBJECT: ROYAL FAMILY CHILD CARE & ACADEMY LLC
Ref. Number: L05000012104

We have received your document for ROYAL FAMILY CHILD CARE & ACADEMY LLC and your check(s) totaling \$138.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2008 through 2009; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$238.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 309A00018036