

L05000025105

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LIMITED LIABILITY REINSTATEMENT

AMELIA RIVER PLANTATION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

\$238.75

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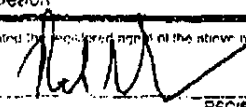
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L05000025105			
1. Limited Liability Company Name Amelia River Plantation, LLC			
2. Principal Office Address (Not P.O. Box #) 5542 First Coast Highway Suite, Apt., #, etc. 401 City & State Fernandina Beach, FL Zip 32034		3. Mailing Office Address C/O Cypress Development Suite, Apt., #, etc. 205 Corporate Center Drive Ste E City & State Stockbridge, GA Zip 30281	
Country US		Country US	
4. State/Country of Formation FL			
5. Date Organized or Qualified To Do Business in Florida 03/14/2005			
6. FEI Number 20-2487061		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 notice. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.			
8. Name and Address of Current Registered Agent Name Richard J. Scholz/Jacobs Scholz & Associates Street Address (P.O. Box Number & Not Applicable) 981687 Gateway Blvd. Suite, Apt., #, etc. 201-I City Fernandina Beach State FL Zip Code 32034			
9. I, being a person 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:  Date 03/25/09 REGISTERED AGENT MUST SIGN			
10. Names and Street Addresses of Managing Member/Managers			
Index	Name of Managing Member/Managers	Street Address of Each Managing Member/Managers	City/State/Zip
MGRM	Paul W. Head	5542 First Coast Highway Ste 401	Fernandina Beach, FL 32034
MGRM	Paschal Gilley, Jr.	436 Beachside Place	Fernandina Beach, FL 32034
REINSTATEMENT 09 AL			
11. I certify that each managing member/manager or the receiver or trustee empowered to execute this application has provided for in Chapter 608, F.S. I further certify that when this reinstatement application the reason for dissolution has been eliminated, the limited liability company again satisfies the requirements of section 602.03(1), (4), (5), and (6), as amended 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 		Date 3-25-09 Daytime Phone # 904-271-0650	
Typed or printed name of (agent) Managing Member/Manager Paul Head			

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