


THIS FORM.  
FILED

08 JAN 15 PM 3:45

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

CR2E041 (12/07)

<b>LIMITED LIABILITY COMPANY REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>		<b>FILED</b> <b>08 JAN 15 PM 3:45</b> <b>SECRETARY OF STATE TALLAHASSEE FLORIDA</b>	
<b>DOCUMENT # L 050000 30614</b>					
<b>1. Limited Liability Company's Name</b> <b>Keller Longbottom Longboat LLC</b>					
<b>2. Principal Office Address - No P.O. Box #</b> <b>4140 GULF OF MEXICO DR</b>		<b>3. Mailing Office Address</b> <b>4288 GRAFTON RD</b>		<b>4. State/Country of Formation</b> <b>FLORIDA</b>	
<b>Suite, Apt. #, etc.</b> <b>3</b>		<b>Suite, Apt. #, etc.</b>		<b>5. Date Organized or Qualified To Do Business in Florida</b> <b>3/25/05</b>	
<b>City &amp; State</b> <b>LONGBOAT KEY FL</b>		<b>City &amp; State</b> <b>BRUNSWICK OH</b>		<b>6. FEI Number</b> <b>20-2519722</b>	
<b>Zip</b> <b>34228</b>	<b>Country</b> <b>USA</b>	<b>Zip</b> <b>44212</b>	<b>Country</b> <b>USA</b>	<b>7. CERTIFICATE OF STATUS DESIRED</b> <input checked="" type="checkbox"/> <b>\$5.00 Additional Fee required for a Certificate of Status</b>	
<b>8. Name and Address of Current Registered Agent</b>					
<b>Name</b> <b>MARILYN M WEAVER</b>					
<b>Street Address (P.O. Box Number is Not Acceptable)</b> <b>4140 GULF OF MEXICO DRIVE</b>					
<b>Suite, Apt. #, Etc.</b> <b>3</b>					
<b>City</b> <b>LONGBOAT KEY</b>		<b>State</b> <b>FL</b>	<b>Zip Code</b> <b>34228</b>		
<b>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.</b>					
<b>Signature of Registered Agent</b> <u><i>Marilyn M Weaver</i></u>				<b>Date</b> <u><i>1/6/08</i></u>	
<b>REGISTERED AGENT MUST SIGN</b>					
<b>10. Names and Street Addresses of Managing Members/Managers</b>					
<b>Titles</b>	<b>Name of Managing Members/Managers</b>	<b>Street Address of Each Managing Member/Manager</b>		<b>City / State / Zip</b>	
<b>MGRM</b>	<b>THOMAS G KELLER</b>	<b>110 KEN MAR DRIVE</b>		<b>BROADVIEW HTS OH 44147</b>	
<b>MGRM</b>	<b>GARY R LONGBOTTOM</b>	<b>4288 GRAFTON ROAD</b>		<b>BRUNSWICK OH 44212</b>	
<b>500114861105</b> <b>01/11/08--01049--014 **421.25</b>					
<b>REINSTATEMENT 06-08</b>					
<b>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.</b>					
<b>Signature of Managing Member/Manager</b> <u><i>GARY R LONGBOTTOM</i></u>				<b>Date</b> <u><i>1/9/08</i></u> <b>Daytime Phone #</b> <u><i>216 375 2669</i></u>	
<b>Typed or printed name of signing Managing Member/Manager</b> <u><b>GARY R LONGBOTTOM</b></u>					