

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 MAY 27 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000034337

1. Limited Liability Company's Name

RICH LAUTNER ENTERPRISES LLC

900156062639
05/15/09--01006--006 **\$60.00
CR2E041 (10/08)

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

1 Beach Dr. SE

Suite, Apt. #, etc.

#2301

City & State

St. Petersburg, Florida

Zip

33701

Country

USA

3. Mailing Office Address

1 Beach Dr. SE

Suite, Apt. #, etc.

Apt. 2301

City & State

St. Petersburg, Florida

Zip

33701

Country

USA

4. State/Country of Formation
Florida / USA

5. Date Organized or Qualified
To Do Business in Florida 04/08/2005

6. FEI-Number

20-2639216

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

Richard D. Lautner

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

1 Beach Dr. SE

Suite, Apt. #, Etc.

#2301

City

St. Petersburg

State

FL

Zip Code

33701

☐ 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

Richard D. Lautner

REGISTERED AGENT MUST SIGN

Date **5/7/09**

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	Richard D. Lautner	1 Beach Dr. SE #2301	St. Petersburg, Florida 33701
		S. HAWKES	
		MAY 28 2009	
		EXAMINER	
		REINSTATEMENT	
		2006-09	
			S. HAWKES
			MAY 28 2009
			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

Richard D. Lautner

Date **5/7/09**

Daytime Phone #

727-612-6737

Typed or printed name of signing Managing Member/Manager

RICHARD D. LAUTNER