


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2007 MAY 10 PM 11:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2E041 (1/07)

<b>LIMITED LIABILITY COMPANY REINSTATEMENT</b>	 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>
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DOCUMENT # L05000039783

1. Limited Liability Company's Name

HIDDEN COAST DEVELOPMENT, LLC

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

2700-A NW 43rd St.

Suite, Apt. #, etc.

City & State

Gainesville, FL

Zip

32606

Country

USA

3. Mailing Office Address

2700-A NW 43rd St.

Suite, Apt. #, etc.

City & State

Gainesville, FL

Zip

32606

Country

USA

4. State/Country of Formation

Florida

5. Date Organized or Qualified  
To Do Business in Florida

4/22/05

6. FEI Number

20-3142139

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

William D. Olinger, III

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

2700-A NW 43rd Street

Suite, Apt. #, Etc.

City

Gainesville

State

FL

Zip Code

32606

☒ 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.

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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

William D. Olinger, III

REGISTERED AGENT MUST SIGN

Date 4/30/07

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	WILLIAM D. OLINGER, III	2700-A NW 43rd St.	Gainesville, FL 32606
MGRM	WILLIAM D. OLINGER	2700-A NW 43rd St.	Gainesville, FL 32606
MGRM	WILLIAM F. KOSS, TRUSTEE	2700-A NW 43rd St.	Gainesville, FL 32606
MGRM	CHARLES I. HOLDEN, JR.	2772-S NW 43rd St.	Gainesville, FL 32606
MGRM	CHARLES OLINGER	2700-A NW 43rd St.	Gainesville, FL 32606

REINSTATEMENT 06-07

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

William D. Olinger, III

Date 4/30/07

Daytime Phone # 352-373-3337

Typed or printed name of signing Managing Member/Manager

William D. Olinger, III



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: HIDDEN COAST DEVELOPMENT, LLC.

2. This limited liability company was organized under the laws of:

Florida.

3. The Florida document/registration number of this limited liability company is:

L05000039783.

4. I, PAUL P. BARCIA, SR., hereby resign as a managing member  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the limited liability company is: HIDDEN COAST DEVELOPMENT, LLC
2. The mailing address of the limited liability company is: 2700-A NW 43rd Street,  
Gainesville, FL 32606

- 4/22/05 L05000039783
3. Date of filing/registration in Florida 4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

PAUL P. BARCIA, SR.  
Name  
552 SW Manatee Terrace  
Address  
Ft. White, FL 32038  
City, State and Zip

6. The name and address of the new registered agent and/or office:

WILLIAM D. OLINGER, III  
Name  
2700-A NW 43rd Street  
Florida street address (P.O. Box **NOT** acceptable)  
Gainesville FL 32606  
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Charles I. Holden, Jr.  
(Signature of a member or authorized representative of a member)

Charles I. Holden, Jr., Member  
(Printed or typed name of signee)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

William D. Olinger, III  
(Signature of Registered Agent)

William D. Olinger, III  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00