

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000044860

1. Entity Name  
PELICAN LEASING, LLC



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DEC -1 AM 8:34

Principal Place of Business  
2808 N.E. 25TH STREET  
FT. LAUDERDALE, FL 33305

Mailing Address  
2808 N.E. 25TH STREET  
FT. LAUDERDALE, FL 33305

2. Principal Place of Business

3. Mailing Address

11062006 REIN-LLC CR2E101 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-2813610

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and type if applicable.

STEVEN P. ZIEGLER  
SPECIAL ASSISTANT SECRETARY

11-14-06

DATE

FILE NOW!!! FEE IS \$150.00  
After January 1, 2007, Fee will be \$200.00

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
BILLITER, DAVID  
2808 N.E. 25TH STREET  
FT. LAUDERDALE, FL 33305

☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
800082211708  
12/01/06--01050--001 \*\*155.00

☐ Change ☐ Addition

TITLE  
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☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

11-22-06