



2008 LIMITED LIABILITY COMPANY

Reinstatement

DOCUMENT # L05000046529 1. Entity Name LANTON LLC				FILED 08 OCT -3 AM 11:04 SECRETARY OF STATE TALLAHASSEE, FLORIDA 	
Principal Place of Business 16741 NW 13 COURT PEMBROKE PINES, FL 33028		Mailing Address 16741 NW 13 COURT PEMBROKE PINES, FL 33028		09252008 Chg-LLC CR2E083 (12/06)	
2. Principal Place of Business - No P.O. Box # 16967 NW 20 ST		3. Mailing Address 16967 NW 20 ST			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Pembroke Pines fl		City & State Pembroke Pines		4. FEI Number 86-1139529	
Zip 33028		Country Broward		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MEDINA ACOSTA, MIGUEL ANGEL 16741 NW 13 COURT PEMBROKE PINES, FL 33028			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE P	NAME MEDINA, MIGUEL A		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 16741 NW 13 COURT	CITY-ST-ZIP PEMBROKE PINES, FL 33028		000136692470 10/07/08--01021--021 **138.75		
TITLE 	NAME 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 	CITY-ST-ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 	CITY-ST-ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 	CITY-ST-ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<div style="display: flex; justify-content: space-between;"> <div> REINSTATEMENT 08 </div> <div> SIGNATURE: Miguel Medina <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> </div> <div> Sep 08, 2008 <small>Date</small> </div> <div> <small>Daytime Phone #</small> </div> </div>					

SIGNATURE:

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

Date

Daytime Phone #