

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT L05000072808

1. Entity Name
KENDALL PROPERTY HOLDINGS, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 DEC 19 PM 1:54

Principal Place of Business
4241 TARPON AVE
BONITA SPRINGS, FL 34135 US

Mailing Address
4241 TARPON AVE
BONITA SPRINGS, FL 34135 US



2. Principal Place of Business, No P.O. Box #
300 Southard St
Suite, Apt. #, etc. 103A

3. Mailing Address
300 Southard St.
Suite, Apt. #, etc. 103A

12032007 REIN-LLC CR2E101 (1/07)

City & State
Key West, FL

City & State
Key West, FL

Zip
33040

Country
USA

Zip
33040

Country
USA

4. FEI Number
20-4355383

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ZIRILLI AND ZIRILLI PA
3154 NORTHSIDE DRIVE
SUITE 101
KEY WEST, FL 33040

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12/13/07

FILE NOW!!! FEE IS \$50.00
After January 1, 2008, Fee will be \$100.00

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

TITLE MGR ☒ Delete
NAME WAGNER, TONY N
STREET ADDRESS 58A BAY DRIVE
CITY-ST-ZIP KEY WEST, FL 33040

TITLE MGRM ☐ Delete
NAME WAGNER, MELVA G
STREET ADDRESS 58A BAY DRIVE
CITY-ST-ZIP KEY WEST, FL 33040

TITLE MGRM ☒ Delete
NAME WAGNER, KENDALL M
STREET ADDRESS 58A BAY DRIVE
CITY-ST-ZIP KEY WEST, FL 33040

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Change ☒ Addition
NAME Crocker, Melanie
STREET ADDRESS 2 Callo Uno - Key West, FL 33040
CITY-ST-ZIP

TITLE MGRM ☐ Change ☒ Addition
NAME Crocker, Richard
STREET ADDRESS 2 Callo Uno - Key West, FL 33040
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 #

M. Wagner

12.14.07

REINSTATEMENT 2007

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