

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 OCT -6 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000094895

1. Limited Liability Company's Name

GAN-RIC INVESTMENT, LLC

ole

900161397369
10706/09--01036--002 **660.00
CR2E041 (1/07)

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

Bank of America Bldg.
701 Brickell Avenue

Suite, Apt. #, etc.

1400

City & State

Miami, FL

Zip

33131

Country

USA

3. Mailing Office Address

Bank of America Bldg.
701 Brickell Avenue

Suite, Apt. #, etc.

1400

City & State

Miami, FL

Zip

33131

Country

USA

4. State/Country of Formation

Florida

**5. Date Organized or Qualified
To Do Business in Florida**

09/27/05

6. FEI Number

Applied For

☒ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a Certificate of Status

☐ 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.

8. Name and Address of Current Registered Agent

Name

George R. Harper, Esq.

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

Bank of America Bldg. - 701 Brickell Avenue

Suite, Apt. #, Etc.

1400

City

Miami

State

FL

Zip Code

33131

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

REGISTERED AGENT MUST SIGN

Date

06/01/09

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
MGR	Jose Ricardo Napolitano	c/o Bank of America Bldg. 701 Brickell Ave - Suite 1400, Miami, FL	33131
M	Minden Associated Inc.	c/o Bank of America Bldg. 701 Brickell Ave - Suite 1400, Miami, FL	33131

REINSTATEMENT 2006, 07, 08 & 2009
10/7/09

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

Date

Daytime Phone#

Typed or printed name of signing Managing Member/Manager Jose Ricardo Napolitano