

L05000106164

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZART
Account Number : 076077001702
Phone : (407) 841-1200
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Email Address: smgentry@kegcorp.com

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LIMITED LIABILITY REINSTATEMENT NEW SONG, LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$377.50

SJB 029397/052075

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LIMITED LIABILITY
COMPANY
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2010 AUG 10 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000106164

1. Limited Liability Company's Name

NEW SONG, LLC

CR2ED41 (05/10)

2. Principal Office Address - No P.O. Box #
150 West Miles Rd.

Suite, Apt. #, etc.

3. Mailing Office Address

809 Appleton Ave.

Suite, Apt. #, etc.

City & State

Carrollton, GA

City & State

Orlando, FL

Zip

30116-8778

Country

USA

Zip

32806

Country

USA

4. State/Country of Formation

FL

5. Date Organized or Qualified
To Do Business in Florida

10/31/2005

6. FEI Number

20-4053297

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

If "Not Applicable", please check this box.

8. Name and Address of Current Registered Agent

Name WHWW, Inc.

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

390 N. Orange Avenue

Suite, Apt. #, Etc.

Suite 1500

City

Orlando

State

FL

Zip Code

32801

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

WHWW, Inc.

Randolph J. Rush, as Vice President

Date August 10, 2010

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Byars, David K.	150 West Miles Rd.	Carrollton, GA 30116
MGR	Gentry, Scott M.	1700 N. Orange Ave., Ste. 400	Orlando, FL 32804

REINSTATEMENT-09-10

11. E-mail Address: emead@flodocs.com

(To be used for future annual report notifications)

12. 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 608.403, 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 8/9, 2010 Daytime Phone # (407) 898-7858

Typed or printed name of signing Managing Member/Manager Scott M. Gentry, Manager

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C.L.