

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 OCT 23 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05 000114826

1. Limited Liability Company's Name

St. Mary's Partners, LLC

CR2E041 (1/07)

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

1328 North Third St

Suite, Apt. #, etc.

3. Mailing Office Address

1328 North Third St.

Suite, Apt. #, etc.

City & State

Jacksonville Beach, FL

City & State

Jacksonville Beach, FL

Zip

32250

Country

USA

Zip

32250

Country

USA

4. State/Country of Formation

FL

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

11/30/05

6. FEI Number

☒ Applied For

☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ \$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

John McE. Miller

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

1328 North Third Street

Suite, Apt. #, Etc.

City

Jacksonville Beach

State

FL

Zip Code

32250

☐ 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.

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**

John McE. Miller

Date 10/16/07

REGISTERED AGENT MUST SIGN

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 |
|--------|--------------------------------------|---|------------------------------|
| MGRM | Trinity Realty Partners, LLC | 1328 North Third St. | Jacksonville Beach, FL 32250 |
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REINSTATEMENT 0607 200111194832
10/23/07--01014--025 **200.00

OK

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**

Paul L. Beeler

Date 10/16/07

Daytime Phone # 904/910-3024

Typed or printed name of signing Managing Member/Manager

Paul L. Beeler, CEO, Trinity Realty Partners, LLC