

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **LO6 000011649**

1. Limited Liability Company's Name

4223 West Sevilla Development LLC

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

143 Monte Carlo Drive

Suite, Apt. #, etc.

City & State

Palm Beach Gardens, FL

Zip

33418

Country

USA

3. Mailing Office Address

143 Monte Carlo Drive

Suite, Apt. #, etc.

City & State

Palm Beach Gardens, FL

Zip

33418

Country

USA

4. State/Country of Formation

Florida/USA

5. Date Organized or Qualified
To Do Business in Florida

February 1, 2006

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

Stuart N. Kaplan

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

143 Monte Carlo Drive

Suite, Apt. #, Etc.

City

Palm Beach Gardens, FL

State

FL

Zip Code

33418

☐ 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

REGISTERED AGENT MUST SIGN

Date **1/30/09**

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	Stuart N. Kaplan	143 Monte Carlo Drive	Palm Beach Gardens, FL 33418
			000144171170 02/23/09--01010--004 **238.75
	S. HAWKES		516-25
	MAR 2 2009		000144171170 03/03/09--01002--003 **277.50
	EXAMINER		REINSTATEMENT 2007-09

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 **1/30/09**

Daytime Phone# **813-404-2100**

Typed or printed name of signing Managing Member/Manager **Stuart N. Kaplan**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 27, 2009

4223 WEST SEVILLA DEVELOPMENT LLC
143 MONTE CARLO DRIVE
PALM BEACH GARDENS, FL 33418

SUBJECT: 4223 WEST SEVILLA DEVELOPMENT LLC
Ref. Number: L06000011649

We have received your document for 4223 WEST SEVILLA DEVELOPMENT LLC and your check(s) totaling \$238.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2007 through 2009; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 109A00006835



LAW OFFICES

KRAMER, ALI, FLECK, HUGHES,
GELB, KAPLAN & BORNSTEIN

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

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* ADMITTED FL, NY & CT
** ADMITTED FL & PA
*** ADMITTED FL & MI
**** ADMITTED FL & NY

Re: L06000011649
4223 West Sevilla Development, LLC

Enclosed is a check for the
under-payment in connection with the
re-enrollment for the above named LLC.

Thank You!

Stuart Kaplan.
(813) 404-2100