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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETINGS THE PROPERTY OF THE PROPERTY O LIMITED LIABILITY 09 SEP 28 PM 3: 56 FLORIDA DEPARTMENT OF STATE COMPANY Secretary of State SECRETARY OF STATE TALL AHASSEE, FLORIDA REINSTATEMENT DIVISION OF CORPORATIONS **DOCUMENT # L0600028155** 1. Limited Liability Company's Name Real Image II, LLC 900160440689 09/09/09--01019--005 **143.75 CR2E041 (10/08) 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address 463 North Lime Avenue SAME 4. State/Country of Formation Florida/USA Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Date Organized or Qualified To Do Business in Florida 2007 City & State City & State Applied For 6. FEI Number Sarasota, Florida 20-4504964 Not Applicable Country Zip Country 7. CERTIFICATE OF STATUS DESIRED [\$5.00 Additional Fee required for a Certificate of Status 34237 8. Name and Address of Current Registered Agent ☑ A \$100 reinstatement fee is imposed, except Cornelius Watkins in circumstances which the entity did not Street Address (P.O. Box Number is Not Acceptable) receive the prior notices. By checking this 463 North Lime Avenue box, you are certifying the prior notices were Suite, Apt. #, Etc. not received and requesting the \$100 reinstatement be waived. City Zip Code Sarasota 34237 9. I, being appointed the registered agent of the above named lighted liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 10. Names and Street Addresses of Managing Members/Managers Name of Managing Members/Managers Street Address of Each Managing Member/Manager Titles City / State / Zip Cornelius Watkins Mngr 463 North Lime Avenue Sarasota, Florida 34237 $\mathbf{J}\mathbf{B}$ 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 filling 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

Typed or printed name of signing Managing Member/Manager_ Cornelius Watkins





FLORIDA DEPARTMENT OF STATE **Division of Corporations**

272 FILED 09 SEP 28 PM 3:55 SECRETARY OF STATE FALLAHASSEE, FLORIDA

September 10, 2009

REAL IMAGE II, LLC **463 NORTH LIME AVENUE** SARASOTA, FL 34237

SUBJECT: REAL IMAGE II, LLC Ref. Number: L06000028155

We have received your document for REAL IMAGE II, LLC and your check(s) totaling \$143.75. 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 2008 through 2009; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$282.50.

We need an additional check for 138.75

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 309A00029966