

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L060000043391

1. Limited Liability Company's Name

OCEAN REEF DOCK, LLC

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

3333 STREET RD

Suite, Apt. #, etc.

STE 101

City & State

BENSALEM PA

Zip

19020

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc

City & State

Zip

Country

4. State/Country of Formation

FL

5. Date Organized or Qualified
To Do Business in Florida

4/26/06

6. FEI Number

20-4862108

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 additional fee required
to a certificate of status

8. Name and Address of Current Registered Agent

Name

CORPORATION SERVICE COMPANY

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

1201 HAYS ST.

Suite, Apt. #, Etc.

City

TALLAHASSEE

State

FL

Zip Code

32301-2555

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

Meryl Weiner ASST VP
REGISTERED AGENT MUST SIGN

Date

4/29/09

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	JEFFREY P. ORLEANS	SAME	
	S. HAWKES	S. HAWKES	
	JUN 10 2009		
	EXAMINER	EXAMINER	

300155763553
05/11/09--01033--019 **238.75

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

Jeffrey P. Orleans

Date

5/1/09

Daytime Phone #

215-633-2384

Typed or printed name of signing Managing Member/Manager

JEFFREY P. ORLEANS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2009

OCEAN REEF DOCK, LLC
3333 STREET RD STE 101
BENSALEM, PA 19020

SUBJECT: OCEAN REEF DOCK, LLC
Ref. Number: L06000043391

We have received your document for OCEAN REEF DOCK, 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 \$516.25.

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: 909A00016497