

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE**  
Secretary of State  
DIVISION OF CORPORATIONS

10 MAR -3 AM 10:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

300170258313  
02/23/10--01023--007 \*\*\$55.00

CR2E041 (11/09)

**DOCUMENT #** L06000099675

1. Limited Liability Company's Name

GMT 4424 MILITARY TRAIL, LLC

2. Principal Office Address - No P.O. Box # 4424 S. MILITARY TRAIL		3. Mailing Office Address 4424 S. MILITARY TRAIL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State LAKE WORTH, FL		City & State LAKE WORTH, FL	
Zip 33463	Country USA	Zip 33463	Country USA

4. State/Country of Formation FLORIDA/USA	
5. Date Organized or Qualified To Do Business in Florida 10-12-2006	
6. FEI Number 20-5716548	Applied For Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent

Name LYDIA SCHUTTE		
Street Address (P.O. Box Number is Not Acceptable) 4424 S. MILITARY TRAIL		
Suite, Apt. #, Etc.		
City LAKE WORTH	State FL	Zip Code 33463

☐ 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 \_\_\_\_\_ Date \_\_\_\_\_  
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	JEFFREY T. ROBBINS	13401 SABALCHASE	PALM BEACH GARDENS FL 33418
MGRM	GREGORY SCHUTTE	1208 MERLOT DRIVE	PALM BEACH GARDENS FL 33410
MGRM	MARK E. WILSON	142 PEDALES WAY	HOCKESSIN, DE 19707
REINSTATEMENT 07-10 DBRUC			

11. E-mail Address: LSCHUTTE@GGP-US.COM

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided 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 Lydia Schutte Date 2/14/10 Daytime Phone # 908-412-6000  
Typed or printed name of signing Managing Member/Manager \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 23, 2010

GMJ 4424 MILITARY TRAIL, LLC  
4424 SOUTH MILITARY TRAIL  
LAKE WORTH, FL 33463

SUBJECT: GMJ 4424 MILITARY TRAIL, LLC  
Ref. Number: L06000099675

We have received your document for GMJ 4424 MILITARY TRAIL, LLC and your check(s) totaling \$655.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Department of State does not maintain the names and addresses of the members of a limited liability company. Please remove the names and addresses of the members from the document OR insert the letters "MGRM" beside their names and addresses to indicate they are serving in the capacity of a managing member.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 410A00004436

RECEIVED  
FEB 26 2010  
BY: \_\_\_\_\_