PLEASE REA	D ALL INS	TRUCTIONS BEFORE	COMPLET		
LIMITED LIABILITY COMPANY REINSTATEMENT		A DEPARTMENT OF STATE Secretary of State VISION OF CORPORATIONS		10 JAN 14 PM 4:56	
DOCUMENT # 607000021767  1. Limited Liability Company's Name				SEONETHAY OF SMATE VALLAHASSEE. FLORIDA	
J. 8 S. Associates LLC				000166224580 01/15/1001001014 **277.50	
Principal Office Address - No P.O. Box #	Office Address	-	CR2E041 (11/09)		
		30x 555674	4. State/Cou	ntry of Formation	
Suite, Apt. #, etc. Suite, Apt. #,		t, etc.		nized or Qualified	
City & State City & State			<u> </u>	siness in Florida 2-26-0/	
Orlando, FL Oclar		ndo, Fl	6. FEI Numb	8396699 Not Applicable	
Zip Country 32805 USA	zip 3 Z 8	355 Country A	7. CERTIFICATI	\$5.00 Additional Fee required for a Certificate of Status	
8. Name and Address of Current Registered Agent					
John Salter				A \$100 reinstatement fee is imposed, except in circumstances which the entity did not	
Street Address (P.O. Box Number is Not Acceptable) 15 83 Kay Ave				receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100	
Suite, Apt. #, Etc.					
City Tallahassee State Zip Code FL 3230/			reinstatement be waived.		
I, being appointed the registered agent of the Signature of Registered Agent	REGISTERED AC	GENT MUST SIGN	d accept the obliga	Date	
		Street Address of Ea	City / State / ZiD		
Maraging Members/Ma	managing members/managers		nager 1		
		2410 Monte larlo Tr		Oclando, FL 32805	
main De Charlie Sean Salter		3464 Pomi Fitz Ct		Octando, FL 32805	
Marin Donald HUZZI'	e	3416 Forest Pale	D-	Orlando, Fl 32808	
				1.0	
REINSTATEMI				99/10	
11. E-mail Address:	, .				
filing this reinstatement application the reason	for dissolution has	been eliminated, the limited liability come e information indicated on this application	olication as provide pany name satisfie n is true and accura	od for in Chapter 608, F.S. I further certify that when es the requirements of section 608,406, F.S., and that late, and my signature shall have the same legal effect paytime Phone # 407-590-0242	
Typed or printed name of signing Managing Member/Manager					