

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

11 FEB 23 AM 8:59

DOCUMENT # LD7000061068

1. Limited Liability Company's Name

C & G Investments OF BAY, LLC

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

5004 THOMAS DR

Suite, Apt. #, etc.

UNIT 1512

City & State

PANAMA CITY, FL

Zip

32408

Country

BAY

3. Mailing Office Address

5004 THOMAS DR

Suite, Apt. #, etc.

UNIT 1512

City & State

PANAMA CITY, FL

Zip

32408

Country

BAY

CR2E041 (1/11)

4. State/Country of Formation

FIA

5. Date Organized or Qualified  
To Do Business in Florida

5-14-2007

6. FEI Number

NONE

☐ 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

George B. Gainer

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

5004 THOMAS DR

Suite, Apt. #, Etc.

UNIT 1512

City

PANAMA CITY

State

FL

Zip Code

32408

E-mail Address:

200195715442  
02/23/11--01007--005 \*\*655.00

ggainerdistrict2@yahoo.com  
(To be used for future annual report notices)

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

[Signature]

Date 2-9-11

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	Gainer, George B.	5004 THOMAS DR UNIT 1512	PANAMA CITY, FL 32408
MGRM	Gainer, CHARLA J.	5004 THOMAS DR UNIT 1512	PANAMA CITY, FL 32408

REINSTATEMENT 08-11

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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing  
Member/Manager

[Signature]

Date 2-9-11

Daytime Phone # 850-785-1591

Typed or printed name of signing Managing Member/Manager

FILED FEB 23 2011

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

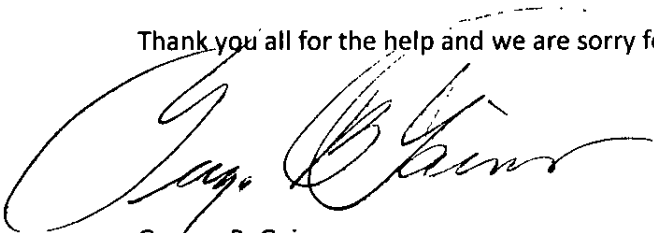
02-09-2011

To whom it may concern,

C & G Investments of Bay, LLC document no L07000051068 filed 5-14-2007 should have been reinstated. Instead we filed it as a new Corporation. We are dissolving C & G Investments of Bay, LLC document no L11000016686 filed 02-08-2011 and reinstating the original corporation.

We were unaware we could reinstate this original corporation.

Thank you all for the help and we are sorry for any inconvenience we may have caused.

A handwritten signature in black ink, appearing to read "George B. Gainer", is written over the typed name. The signature is fluid and cursive.

George B. Gainer