

L07000071577

Florida Department of State
Division of Corporations
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Division of Corporations
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**LIMITED LIABILITY REINSTATEMENT
HOTCHOPS CUSTOM CYCLES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$377.50

RECEIVED
10 OCT 14 AM 6:27
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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

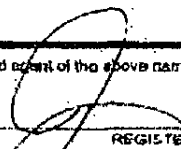
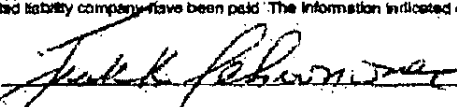
Help

J. BRYAN

OCT 15 2010

EXAMINER

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		10 OCT 14 AM 7:55 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # L07000071577					
1. Limited Liability Company's Name HOTCHOPS CUSTOM CYCLES LLC					
2. Principal Office Address - No P.O. Box # 7109 58th Street Suite, Apt. #, etc.		3. Mailing Office Address 7109 58th Street Suite, Apt. #, etc.		4. State/Country of Formation FL	
City & State PINELLAS PARK, FL		City & State PINELLAS PARK, FL		5. Date Organized or Qualified To Do Business in Florida 07/10/2007	
Zip 33781	Country USA	Zip 33781	Country USA	6. FEI Number	☒ Applied For ☐ Not Applicable
7. CERTIFICATE OF STATUS DESIRED ☐				☐ 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.	
8. Name and Address of Current Registered Agent Name UNITED STATES CORPORATION AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 13302 WINDING OAKS BLVD Suite, Apt. #, Etc. SUITE A-100 City TAMPA					
State FL Zip Code 33612					
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 10/13/10 JAKE VARGHESE, VP on behalf of UNITED STATES CORPORATION AGENTS, INC. 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	ALVEY, CHARLES R	7109 58th Street	PINELLAS PARK FL 33781		
MGRM	SCHOONOVER, FRANK K	7109 58th Street	PINELLAS PARK FL 33781		
MGRM	SCHOONOVER, COLIN D	7109 58th Street	PINELLAS PARK FL 33781		
REINSTATEMENT 2009-10					
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 608.408, 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  Date 10-06-10 Daytime Phone # 727-214-7499					
Typed or printed name of Signing Managing Member/Manager Frank Schoonover					