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

Certificate of Status	0
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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

FILED
10 OCT 14 AM 7:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E041 (10/08)

DOCUMENT # L07000071577

1. Limited Liability Company's Name

HOTCHOPS CUSTOM CYCLES LLC

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
7109 58th Street		7109 58th Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
PINELLAS PARK, FL		PINELLAS PARK, FL	
Zip	Country	Zip	Country
33781	USA	33781	USA

4. State/Country of Formation
FL

5. Date Organized or Qualified To Do Business in Florida 07/10/2007

6. FEI Number ☐ Applied For ☑ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $30.00 Additional Fee Required

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	State	Zip Code
TAMPA	FL	33612

☐ 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: Jake Varghese, VP on behalf of UNITED STATES CORPORATION AGENTS, INC. Date 10/13/10

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 608.406, 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: [signature] Date 10-06-10 Daytime Phone # 727 214 7499

Typed or printed name of Signing Managing Member/Manager: Frank Schoonover