

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : MURDOCH, WEIRES & NEUMAN, PLLC
Account Number : I20130000082
Phone : (561) 347-8700
Fax Number : (561) 409-2341

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: rmurdoch@mwnlegal.com

**LIMITED LIABILITY REINSTATEMENT
SCHUTTLER LAND PROPERTIES, LLC**

Certificate of Status	0
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Page Count	02
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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EXAMINER

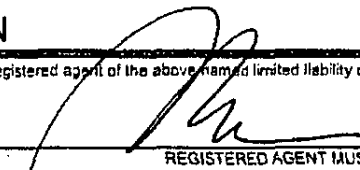
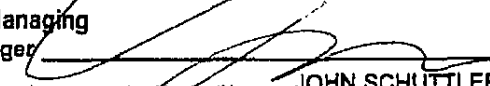
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 SECRETARY OF STATE
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LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L 10000 122682 1. Limited Liability Company's Name SCHUTTLE LAND PROPERTIES, LLC			
2. Principal Office Address - No P.O. Box # 264 NW 7th COURT Suite, Apt. #, etc. City & State BOCA RATON, FL Zip Country 33486 USA		3. Mailing Office Address 264 NW 7th COURT Suite, Apt. #, etc. City & State BOCA RATON, FL Zip Country 33486 USA	
		4. State/Country of Formation FLORIDA	
		5. Date Organized or Qualified To Do Business in Florida 11/29/2010	
		6. FEI Number 383825616	Applied For Not Applicable
		7. CERTIFICATE OF STATUS DESIRED ☐ \$5.00 Additional Fee required for a Certificate of Status	
B. Name and Address of Current Registered Agent Name RICHARD A. MURDOCH, ESQ. Street Address (P.O. Box Number is Not Acceptable) 14 SE 4TH STREET Suite, Apt. #, Etc. SUITE 36 City State Zip Code BOCA RATON FL 33432		E-mail Address: rmurdoch@mwnlegal.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  Date 10/25/13 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	JOHN SCHUTTLE	264 NW 7th COURT	BOCA RATON, FL 33486
MGRM	HOLLY SCHUTTLE	264 NW 7th COURT	BOCA RATON, FL 33486
			S. HAWKES
			OCT 25 2013
			EXAMINER
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  Date 10-24-13 Daytime Phone # 561-347-8700 Typed or printed name of signing Managing Member/Manager JOHN SCHUTTLE			