

L11000093300

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L11000093300**

1. Limited Liability Company's Name
The Brick House LLC

800330752038
06/12/19--01008--009 **987.50

2. Principal Office Address - No P.O. Box #
4997 Veterans Memorial Drive
Suite, Apt. #, etc.

3. Mailing Office Address
4997 Veterans Memorial Drive
Suite, Apt. #, etc.

CR2E041 (1/14)

City & State
Tallahassee

City & State
Florida

Zip
32309

Country
USA

Zip
32309

Country
USA

4. State/Country of Formation
Florida

5. Date Organized or Quashed
To Do Business in Florida **August 15, 2011**

6. FEI Number

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
Paul Mercer Fearington, Sr.
Street Address (P.O. Box Number is Not Acceptable) Suite,
4997 Veterans Memorial Drive
Apt. #, etc.

City
Tallahassee

State
FL

Zip Code
32309

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of
Registered Agent

Paul Mercer Fearington, Sr.
REGISTERED AGENT MUST SIGN

Date **June 12 2019**

10. Names and Street Addresses of Authorized Representatives/Managers

Title	Name of Authorized Representative/ Manager	Street Address of Each Authorized Representative/ Manager	City / State / Zip
MGMR	Paul Mercer Fearington, S.R.	4997 Veterans Memorial Drive	Tallahassee, Florida 32309

11. E-mail Address **katherinedev@gmail.com**

(To be used for future annual report notifications)

12. I certify that I am an authorized representative manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement of section 605.0212, 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 authorized representative/member

Paul Mercer Fearington, Sr.

Date

June 12 2019

Daytime Phone #

8502510408

Typed or printed name of signing authorized representative/member

K. SALY

JUN 13 2019

19 JUN 12 PM 3:06
TALLAHASSEE
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILED

AUSLEY McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

123 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560

June 12, 2019

Florida Secretary of State
Division of Corporations
2661 Executive Center Circle West
Tallahassee, Florida 32301

VIA HAND DELIVERY

RE: The Brick House LLC - Document Number: L11000093300

Dear Sir or Madam:

Enclosed is a Reinstatement for the above-referenced company. Since the name *The Brick House LLC* is no longer available, also enclosed are Articles of Amendment to Articles of Organization of The Brick House LLC changing the name to **Fearington, LLC**. Also enclosed is a check for \$987.50 to cover the filing fees (\$932.50 to reinstate and \$55.00 for the Articles of Amendment and a certified copy).

Thank you for your assistance.

Sincerely,



Chris Vause
Secretary to Robert A. Pierce

/cv

Enclosures

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19 JUN 12 PM 1:42
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA