SE READ ALL	INSTRUCTIONS BEFORE COMPLET	TINGTHIS FORM
LIMITE LIABILITY COMPANY REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	I am a one man operation doing Forme markets this season
DOCUMENT# L14000162870 1. Limited Liability Company's Name Prchy Snappy Designs by Grace LLC		was ill last year and cauldings get it going.
10340 Vonderbilt Dr	3. Mailing Office Address 10340 Vonderbilt Dr.	4. State/Country of Formation
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc.	5. Date Organized or Qualified To Do Business in Florida 6. FEL Number Applied For
Noples, FL Zip Country US 34108 Cotty	Noples FL Zip Country 34108 Callier	Not Applicable 7. CERTIFICATE OF STATUS DESIRED
8. Name and Address of Current Registered Agent Name Croce OBrien Street Address (P.O. Box Number is Not Acceptable) Suite, 103-10 Voncey Oilt IDr		200291340442 11/08/1601011025 **377.50
Apt. #. Etc. City Codes	State Zip Code FL 34108	200291340442 10/18/1601004023 **238.75
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and acce Signature of Registered Agent REGISTERED AGENT MUST SIGN		ept the obligations of Chapter 605, F.S. Date
10 Names and Street Addresses of Authorized Represent	atives/Managers	
Titles Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representativ Manager	re/ City / State / Zip
wner Grace OBru	en 10340 Vonder	bitter Naples, FL34109
DEINICOLATRO		S. HAWKES
REINSTATE	MENT 21.50	EXAMINER
d0150	2016	
11. E-mail Address: Drchysnan	ing 7 a vahoo, can	1

Signature of authorized representative/member Typed or printed name of signing authorized representative/member

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 605.0012, 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.

(Tobe used for future annual report notifications)





FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2016

PRETTY SNAPPY DESIGNS BY GRACE LLC 10340 VANDERBILT DRIVE NAPLES, FL 34108

SUBJECT: PRETTY SNAPPY DESIGNS BY GRACE LLC

Ref. Number: L14000162870

We have received your document for PRETTY SNAPPY DESIGNS BY GRACE LLC and your check(s) totaling \$238.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2015 through 2016;and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$377.50.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 016A00022394