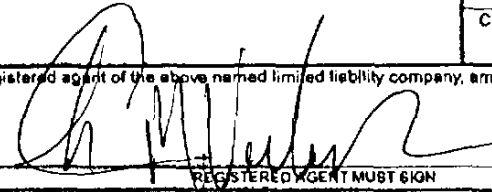
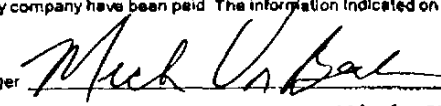


APPLICATION FOR REINSTATEMENT FOR LIMITED LIABILITY COMPANY		FLORIDA DEPARTMENT OF STATE Sandra B. Mortimer Secretary of State DIVISION OF CORPORATIONS		FILED 90 MAY 19 PM 5:00 SECRETARY OF STATE FLORIDA	
Make Check Payable To: FLORIDA DEPARTMENT OF STATE					
1. Name and Mailing Address of Limited Liability Company DESOTO LANES, L.C. 1801 GLENGARY STREET SARASOTA, FL 34231			DOCUMENT # L95000000803		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
3. Date Organized or Qualified 10/23/95			3a. State of Formation FLORIDA		
4. FEI Number			☒ Applied For ☐ Not Applicable		
5. Date of Last Report 4/14/96			6. Certificate of Status Desired ☐		
7. Name and Address of Current Registered Agent THE LAW OFFICE OF CHRIS M. VORBECK, P. 1801 GLENGARY STREET SARASOTA, FL 34231			8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 600002887766--4 Suite, Apt. #, etc. -05/26/99--01107--002 ***1066.25 ***1066.25 City FL Zip Code		
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 <u>5/12/99</u> REGISTERED AGENT MUST SIGN					
10. Title	Managing Members/Managers	Business Street Address	City, State & Zip Code		
MGR	MICK VORBECK	1801 GLENGARY STREET	SARASOTA, FL 34231		
MGR	CHRIS M. VORBECK	1801 GLENGARY STREET	SARASOTA, FL 34231		
MGR	CARY VORBECK	1801 GLENGARY STREET	SARASOTA, FL 34231		
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 <u>4/30/99</u> Daytime Phone # <u>941-921-3124</u> Typed or printed name of signing Managing Member/Manager <u>Mick Vorbeck</u>					