

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 MAY -2 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-05/16/02--01002--010
****200.00 ****200.00

DOCUMENT #

1. Limited Liability Company's Name

Windemere West, L.C.

2. Principal Office Address

128 Main Street

Suite, Apt. #, etc.

City & State

Osprey, FL

Zip Country

34229

3. Mailing Office Address

128 Main Street

Suite, Apt. #, etc.

City & State

Osprey, FL

Zip Country

34229

4. State/Country of Formation

Florida

5. Date Organized or Qualified

To Do Business in Florida

9/16/96

6. FEI Number

65-0697264

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

James R Chandler, III

Street Address (P.O. Box Number is Not Acceptable)

1834 Main Street

Suite, Apt. #, Etc.

City

Sarasota

State
FL

Zip Code

34236

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

4/29/02

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	Marc A. Fortenza	128 Main Street	Osprey, FL 34229
MGR	Yasmin Fortenza	3403 San Juan St.	Tampa, FL 33629

REINSTATEMENT 2001-02

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

4/29/02

Daytime Phone #

941-951-1503

Typed or printed name of signing Managing Member/Manager

Marc A. Fortenza