APPLICATION FOR REINSTATEMENT FOR LIMITED LIABILITY COMPANY

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

L96000001134

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 APR 20 AM 10:46

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company **DOCUMENT #**

CALIFORNIA GOLF CLUB LC
20898 SAN SIMEON WAY
NO. MIAMI BEACH, FL 33179

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

1a. Principal Place of Business Address
20898 San Simeon Way
No. Miami Beach, FL 33179

2 Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

3. Date Organized or Qualified: 10/25/96
3a. State of Formation: FLORIDA
4. FEI Number: 65-0712149 ☐ Applied For ☐ Not Applicable
5. Date of Last Report:
6. Certificate of Status Desired $8.75 Additional Fee Required ☒

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent
R. DANIEL MAYS 15650 SW 83rd Avenue Miami, FL	Name: R. DANIEL MAYS Street Address (P.O. Box Number Is Not Acceptable): 14610 SW 64 COURT Suite, Apt. #, etc.: City: MIAMI FL Zip Code: 33158

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 R Daniel Mays Date 4/18/98
REGISTERED AGENT MUST SIGN

10. Title	Managing Members/Managers	Business Street Address	City, State & Zip Code
	Stephen J. Garchik, Managing Member	8251 Greensboro Drive, Suite 850	McLean, VA 22102
	R. Daniel Mays, Managing Member	7950 NW 53rd Street	Miami, FL 33166

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REINSTATEMENT 1997-1998

BC CUS

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 608.508, 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 R Daniel Mays Date 4/18/98 Daytime Phone # (305) 463-0463

Typed or printed name of signing Managing Member/Manager R. Daniel Mays

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