

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2004 MAY 11 A 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L97000000540

1. Limited Liability Company's Name

Eagle Holdings Outdoor LLC

200036058112
05/11/04--01051--002 **280.00

2. Principal Office Address

2013 Live Oak Blvd

Suite, Apt. #, etc.

Suite J.

City & State

St. Cloud, FL

Zip

34771

Country

U.S.A.

3. Mailing Office Address

2013 Live Oak Blvd.

Suite, Apt. #, etc.

Suite J

City & State

St. Cloud, FL

Zip

34771

Country

U.S.A.

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

May 16, 1997

6. FEI Number

59-3464919

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

Daniel R. Blackford

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

2216 Spring Lake Circle

Suite, Apt. #, Etc.

City

St. Cloud

State

FL

Zip Code

34771

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

Daniel R. Blackford

REGISTERED AGENT MUST SIGN

Date May 10, 2004

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
mmba	Daniel R. Blackford	2216 Spring Lake Circle	St. Cloud, FL 34771
mbr	Diane Blackford	2216 Spring Lake Circle	St. Cloud, FL 34771

REINSTATEMENT

02-04-05
dec

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

Daniel R. Blackford

Date May 10, 2004 Daytime Phone # 407-895-9945

Typed or printed name of signing Managing Member/Manager

Daniel R. Blackford

CR2E041 (10/02)