

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

L980-00000324

FILED

1. DOCUMENT # L98000000324

Name and Mailing Address

0004858 01 FP 0.352 **PRSR T5 0 0615 33607-586085



ITI CONSTRUCTION, L.L.C.
3001 N. ROCKY POINT DR., #335
TAMPA FL 33607-5860

02 NOV -5 PM 4:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. New Mailing Address

City, State, Zip

Principal Place of Business

3001 N. ROCKY POINT DR., #335
TAMPA FL 33607

3. New Principal Place of Business Address

City, State, Zip

4. State/Country of Formation

FL

5. Date Organized or Qualified
To Do Business in Florida

03/16/1998

6. FEI Number

59-3500396

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

YAZDANI, REZA
3001 N. ROCKY POINT DR., #335
TAMPA FL 33607

9. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

10. 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

REGISTERED AGENT MUST SIGN

Date 10.31.02

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	YAZDANI, REZA	3001 N. ROCKY POINT DR., #335	TAMPA FL 33607

REINSTATEMENT

2002

Byk

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10/25/02--01114--009 **150.00

12. 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

Date

10.22.02

Daytime Phone #

813.281.2929

Typed or printed name of signing Managing Member/Manager

Reza Yazdani

CR2E(84) (8/02)