

PLEASE READ INSTRUCTIONS BEFORE COMPLETING FORM.

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 SEP 15 PM 1:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L98000000939

1. Limited Liability Company's Name  
Torch Realty, LLC

2. Principal Office Address  
284 NW 46th Street

Suite, Apt. #, etc.

City & State  
Boca Raton, FL

Zip  
33431

Country  
USA

3. Mailing Office Address  
284 NW 46th Street

Suite, Apt. #, etc.

City & State  
Boca Raton, FL

Zip  
33431

Country  
USA

4. State/Country of Formation

5. Date Organized or Qualified  
To Do Business in Florida 6/29/1998

6. FEI Number 65-0851283

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  
Orin Shakerdge

Street Address (P.O. Box Number is Not Acceptable)  
284 NW 46th Street

Suite, Apt. #, Etc.

City  
Boca Raton

State  
FL

Zip Code  
33431

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

*Orin Shakerdge, as Managing Member for LLC*  
REGISTERED AGENT MUST SIGN

Date 9/10/2003

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	Orin Shakerdge	284 NW 46th Street	Boca Raton, FL 33431
MGRM	David Zietz	674 S. Military Trail	Deerfield Beach, FL 33442
MGRM	Sam Zietz	674 S. Military Trail	Deerfield Beach, FL 33442

REINSTATEMENT

1999-2003

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

*Orin Shakerdge*

Date 9/10/2003

Daytime Phone# 561-694-4678

Typed or printed name of signing Managing Member/Manager Orin Shakerdge, as Managing Member for Torch Realty LLC

CR2E041 (10/02)