


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

 **FLORIDA DEPARTMENT OF STATE**
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 DEC 22 PM 12:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT *2000*

DOCUMENT #

1. Limited Liability Company's Name

John Settle Holdings L.L.C.

L9800000 2/26

2. Principal Address

John Settle
Suite, Apt. #, etc.
13 Flint Way

3. Mailing Office Address

13 Flint Way
Suite, Apt. #, etc.

4. State/Country of Formation

Florida

5. Date Organized or Qualified To Do Business in Florida

City & State

Boynton Beach FL

City & State

Boynton Beach FL

Zip

33462

Country

Zip

33462

Country

6. FEI Number

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

John Settle

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

13 Flint Way

Suite, Apt. #, Etc.

City

Boynton Beach

State
FL

Zip Code

33462

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

John Settle

Date

12/6/00

REGISTERED AGENT MUST SIGN

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
<i>Pres</i>	<i>John Settle</i>	<i>13 Flint Way</i>	<i>Boynton Beach FL 33462</i>

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

John Settle

Date

12/6/00

Daytime Phone #

561-433-4257

Typed or printed name of signing Managing Member/Manager