

PLEASE READ LIMITED LIABILITY COMPANY BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 NOV 26 PM 4:15

DOCUMENT #

1. Limited Liability Company's Name

L99-2713
H.S. ASSOCIATES of VERO BEACH, L.C.

2. Principal Office Address

5665 N. US HWY 1

Suite, Apt. #, etc.

City & State

VERO BEACH, FL.

Zip

32967-7530

3. Mailing Office Address

86 BERNER RD

Suite, Apt. #, etc.

City & State

GLAD HILLS, FL

Zip

19342

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified

To Do Business in Florida

10/22/98

6. FEI Number

23-3004202

Applied For

Not Applicable

7.

CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for Certificate of Status

8. Name and Address of Current Registered Agent

Name

SAMUEL A. BLOCK, ESQ.

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

999 BEACHLAND BOULEVARD

Suite, Apt. #, Etc.

City

VERO BEACH, FL

700004717887-9

-12/11/01-01016-005

****150.00 ****150.00

State

FL

Zip Code

32963

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

SAMUEL A. BLOCK

Date 10-23-01

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

MR. RICHARD W. PATTON JR.

86 BERNER RD

GLAD HILLS, FL 19342

REINSTATEMENT

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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

RICHARD W. PATTON JR.

Date 10/19/01

Daytime Phone # 610-918-1100 X160

Typed or printed name of signing Managing Member/Manager

RICHARD W. PATTON JR.

CR2E041 (9/01)