

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

2004 JAN -6 AM 8:12

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

1. DOCUMENT # L99000002292

Name and Mailing Address

0017056 01.FP 0.352 \*\*PRSR T3 0 0615 11430

AIRWAY CLEANERS, LLC  
JFK INTERNATIONAL AIRPORT, BLDG #67  
SUITE 3216  
JAMAICA NY 11430

400026056204  
01/06/04--01007--006 \*\*150.00



**Airway Cleaners LLC**

2. New Mailing Addr

15 Clinton Avenue  
Rockville Centre, New York 11570  
Phone: 516.594.4944 Fax: 516.594.4902

Principal Place of Business

JFK INTERNATIONAL AIRPORT, BLDG #67  
SUITE 3216  
JAMAICA NY 11430

3. New Principal Place of Business Address

15 Clinton Ave  
Rockville Centre NY 11570

4. State/Country of Formation  
FL

5. Date Organized or Qualified  
To Do Business in Florida

04/22/1999

6. FEI Number

11-3498797

Applied For

Not Applicable

CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required  
for a Certificate of Status

8. Name and Address of Current Registered Agent

CATANESE, FREDERICK  
11 NORTH GOLFVIEW ROAD, #101  
LAKE WORTH FL 33460

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

**SIGNATURE REQUIRED**

REGISTERED AGENT MUST SIGN

Date

12/10/03

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
MGRM	CATANESE, FREDERICK	31 CHARLESTON DRIVE	HUNTINGTON NY 11743
MGRM	CATANESE, ERNEST	56 ESTATES TERRACE NORTH	MANHASSET NY 11030
MGRM	DEPHILLIPS, CATHERINE	384 NASSAU AVENUE	MANHASSET NY 11030

**REINSTATEMENT 2003**

12. I certify that I am managing member/manager of the receiver of the company 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

**SIGNATURE REQUIRED**

Date

12/10/03

Daytime Phone #

Typed or printed name of signing Managing Member/Manager

Frederick Catanese Jr.