

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
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 2000

DOCUMENT # L99000002817

1. Limited Liability Company's Name

SUNDANCE OF SOUTH FLORIDA, LLC.

2. Principal Office Address

9240 BONITA BEACH RD

3. Mailing Office Address

9240 Bonita Beach Rd.

4. State/Country of Formation

U.S.A.

**5. Date Organized or Commenced
To Do Business in Florida**

31. MAR. 99

6. FEI Number

65-0941147

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

STEVEN I. WINER

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

12800 UNIVERSITY DR.

Suite, Apt. #, Etc.

SUITE 600

City

FT. MYERS, FLORIDA 33907

State

FL

Zip Code

33907

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

Steven I. Winer

REGISTERED AGENT MUST SIGN

Date 16. November, 2000

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.	DIETER WENWIESER	9240 BONITA BEACH RD., STE 1117	BONITA SPRINGS, FL 34135

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

D. W. Winer

Date

17. Nov 2000

Daytime Phone #

Typed or printed name of signing Managing Member/Manager