

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

2002 JAN 29 PM 4:23

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOCUMENT # **L99000003365**

1. Limited Liability Company's Name

WINKLER Avenue, L.L.C.

2. Principal Office Address

13524 Rosewood Ln.

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 110448

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34119

Country

Collier

Zip

34108

Country

Collier

4. State/Country of Formation

Collier County

5. Date Organized or Qualified
To Do Business in Florida

6-10-99

6. FEI Number

651027518

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

ANTONIO FAGA Esquire

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

375 12th Ave S.

Suite, Apt. #, Etc.

City

NAPLES

State

FL

Zip Code

34102

9. I, being appointed as a 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

Antonio Faga

Date

1-25-02

REGISTERED AGENT MUST SIGN

10. Name and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	ERIC FEINSTEIN	13524 Rosewood Ln	NAPLES, FL. 34119

REINSTATEMENT

01-07

SL

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 608.408, F.S., and that all fees owed by this 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

Eric Feinstein

Date

1-25-02

Daytime Phone #

941.513.2272

Typed or printed name of signing Managing Member/Manager

ERIC FEINSTEIN