PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JAN -7 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000003802

1. Limited Liability Company's Name
FRIENDS OF DAYTONA BASEBALL, L.L.C.

07

2. Principal Office Address		3. Mailing Office Address	
103 E Orange Ave.		103 E. Orange Ave.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Daytona Beach, FL		City & State: Daytona Beach, FL	
Zip: 32114	Country: USA	Zip: 32114	Country: USA

4. State/Country of Formation: FL, USA

5. Date Organized or Qualified To Do Business in Florida: 06/28/1999

6. FEI Number: 52235490 ☐ 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: Charles D. Hood, Jr.

Street Address (P.O. Box Number is Not Acceptable): 444 Seabreeze Blvd

Suite, Apt. #, Etc.: Ste. 900

City: Daytona Beach | State: FL | Zip Code: 32118

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 _____ REGISTERED AGENT MUST SIGN Date 1/6/05

CR2E041 (10/02)

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
MGRM	H Darden Jenkins	125 Basin St., Ste 102	Daytona Beach, FL 32114
			500044285665
	REINSTATEMENT	2003-2005	
		DK	

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 H Darden Jenkins Date 11/4/04 Daytime Phone # 386-423-3730

Typed or printed name of signing Managing Member/Manager _____

CSC. CORPORATION SERVICE COMPANY

L99000003802

ACCOUNT NO. : 072100000032

REFERENCE : 128847 10764A

AUTHORIZATION :

COST LIMIT : $ 255.00

Patricia Pizzuto

ORDER DATE : January 6, 2005

ORDER TIME : 4:22 PM

ORDER NO. : 128847-005

CUSTOMER NO: 10764A

CUSTOMER: Ms. Kara L. Thomas
Smith, Hood, Perkins, Loucks,
Suite 900
444 Seabreeze Boulevard
Daytona Beach, FL 32118

FILED
05 JAN -7 AM 11:16
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TALLAHASSEE, FLORIDA

RECEIVED
05 JAN -7 AM 8:46
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: FRIENDS OF DAYTONA BASEBALL, L.L.C.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Justin Cheshire

EXAMINER'S INITIALS _____