

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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT #

L99-4058

1. Limited Liability Company's Name

RAVENSWOOD LLC

REINSTATEMENT 2000

2. Principal Office Address

708 Commerce Way

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Jupiter, FL

City & State

Zip

Country

33458

U.S.

Zip

Country

4. State/Country of Formation

FLORIDA - USA

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

59-0217649

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

James L. Heaton

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

708 Commerce Way

Suite, Apt. #, Etc.

City

Jupiter

State
FL

Zip Code

33458

100003488221--6

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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

[Signature]

REGISTERED AGENT MUST SIGN

Date Oct 26, 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
	James L. Heaton	708 Commerce Way	Jupiter, FL 33458

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

[Signature]

Date

Daytime Phone # 561-746-5123

Typed or printed name of signing Managing Member/Manager

James L. Heaton