

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
00 DEC 12 AM 8:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REINSTATEMENT**

2000

**DOCUMENT # L99000006202**

**1. Limited Liability Company's Name**

Big Sid Bears, LC

**2. Principal Office Address**

2189 Cleveland St#224  
Clearwater FL 33765  
Suite, Apt. #, etc.

City & State

Zip Country

**3. Mailing Office Address**

2189 Cleveland St#224  
Clearwater FL 33765  
Suite, Apt. #, etc.

City & State

Zip Country

**4. State/Country of Formation**

FL / Pinellas

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

09/30/1999

**6. FEI Number**

59-3600152

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

Sidney Petry

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

2189 Cleveland St. Ste. 224

Suite, Apt. #, Etc.

City

Clearwater

State  
FL

Zip Code  
33765

**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

Sidney S. Petry  
REGISTERED AGENT MUST SIGN

Date 12/6/2000

**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
MM	Petry, Sidney	Managing Member	2189 Cleveland St #224 Clearwater FL 33765

**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

Sidney S. Petry

Date 12/6/2000 Daytime Phone (727) 786-5314

Typed or printed name of signing Managing Member/Manager