

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L99000006555

1. Limited Liability Company's Name

Hel's Heaven, LLC

2. Principal Office Address - No P.O. Box #

9771 S. Dixie Hwy.

Suite, Apt. #, etc.

3. Mailing Office Address

9771 S. Dixie Hwy.

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33156

Country

US

City & State

Miami, FL

Zip

33156

Country

US

4. State/Country of Formation

FL

5. Date Organized or Qualified  
To Do Business in Florida

10/11/99

6. FEI Number

☐ 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

Helene Hollub

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

9771 S. Dixie Hwy.

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33156

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 7/26/10

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
mgr	Helene Hollub	9771 S. Dixie Hwy.	Miami, FL 33156

REINSTATEMENT

202-10 284

11. E-mail Address: Mindy @ hollubhomes.com

12. 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

Date 7/26/10

Daytime Phone #

305-665-4275

Typed or printed name of signing Managing Member/Manager

Helene Hollub