

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED

FILED

01 JAN 12 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

DOCUMENT #

L99000007134

1. Limited Liability Company's Name

S-P MARCO INVESTMENTS, LLC

2. Principal Office Address

229 North Collier Blvd.

Suite, Apt. #, etc.

City & State

Marco Island, FL

Zip

34145

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

10-22-99

6. FEI Number

65-0958817

X

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

Thomas F. Hudgins

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

821 Fifth Avenue South, Suite

Suite, Apt. #, Etc.

201

City

Naples

State

FL

Zip Code

34102

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

Thomas F. Hudgins

REGISTERED AGENT MUST SIGN

Date

Jan 11, 2001

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	Thomas F. Hudgins	821 Fifth Avenue South, #201	Naples, FL 34102

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

Thomas F. Hudgins

Date

1/11/2001

Daytime Phone #

941 436-1526

Typed or printed name of signing Managing Member/Manager

Thomas F. Hudgins

CR2E041 (9/99)