

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FILED

03 MAY 22 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L990000008060

1. Limited Liability Company's Name

MARS SPANISH RIVER REALTY, LLC

500019683095  
05/22/03--01003--020 \*\*350.00

2. Principal Office Address

17674 Scarsdale Way

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton, FL

City & State

Zip

Country

Zip

Country

33496

4. State/Country of Formation

Florida

5. Date Organized or Qualified  
To Do Business in Florida

11/19/99

6. FEI Number

650927053

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

Lois Kaniuk

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

17674 Scarsdale Way

Suite, Apt. #, Etc.

City

Boca Raton

State  
FL

Zip Code

33496

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

Date

4/30/03

LOIS KANIUK

REGISTERED AGENT MUST SIGN

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	Lois Kaniuk	17674 Scarsdale Way	Boca Raton, FL 33496
MGRM	Sallie Kaniuk	43 Spector Lane	Plainview, NY 11803
MGRM	Ronald Scott Kaniuk	301 E 69th Street #8	New York, NY 10019

REINSTATEMENT

01-03  
dec

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

Date

4/30/03

Daytime Phone #

561/212 4208

Typed or printed name of signing Managing Member/Manager

LOIS KANIUK, MANAGING MEMBER

CR20041 (10/02)