

Division of Corporations

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# C99000008660

**Florida Department of State**  
**Division of Corporations**  
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**To:**

Division of Corporations  
 Fax Number : (850) 922-4003

**From:**

Account Name : AGI REGISTERED AGENTS, INC.  
 Account Number : I20000000205  
 Phone : (305) 416-6800  
 Fax Number : (305) 416-6811

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## LIMITED LIABILITY REINSTATEMENT

**VILLA MARINA DEVELOPERS, LLC**

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| Certificate of Status | 1        |
| Certified Copy        | 0        |
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| Estimated Charge      | \$205.00 |

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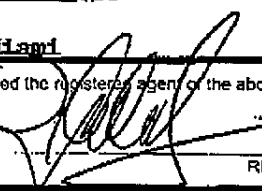
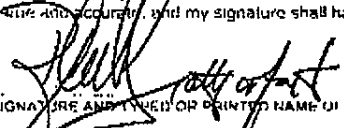
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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| <b>CORPORATION<br/>REINSTATEMENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                   |  <b>FLORIDA DEPARTMENT OF STATE</b><br><b>Katherine Harris</b><br><b>Secretary of State</b><br><b>DIVISION OF CORPORATIONS</b> |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------|-----------------------------------|------------------------------------------------|--------------------|------------|--------------------------|-----------------------------|-----------------------------|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>DOCUMENT #</b> L99000008660<br><b>1. Corporation Name</b><br><p style="text-align: center;"><b>Villa Marina Developers, LLC</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                                                                                                                                                                                                                 |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>2. Principal Office Address</b><br><p><b>1414 Brickell Avenue</b></p> Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                   | <b>3. Mailing Office Address</b><br><p><b>c/o AGI Registered Agents, Inc.</b></p> Suite, Apt. #, etc.<br><p><b>Suite 900</b></p>                                                                                |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>City &amp; State</b><br><p><b>Miami, Florida</b></p> Zip<br><p><b>33131</b></p> Country<br><p><b>U.S.A.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                   | <b>City &amp; State</b><br><p><b>Miami, Florida</b></p> Zip<br><p><b>33131</b></p> Country<br><p><b>U.S.A.</b></p>                                                                                              |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   | <b>4. Date Incorporated or Qualified To Do Business in Florida</b><br><p style="text-align: right;"><b>12-09-99</b></p>                                                                                         |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   | <b>5. FEI Number</b><br><p style="text-align: center;"><b>65-0967367</b></p> Applied For<br><input type="checkbox"/> Not Applicable                                                                             |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   | <b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> <b>58.75 Additional Fee required for a Certificate of Status</b>                                                                               |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>7. Name and Address of Current Registered Agent</b><br>Name<br><p><b>AGI Registered Agents, Inc.</b></p> Street Address (P.O. Box Number is Not Acceptable)<br><p><b>1200 Brickell Avenue</b></p> Suite, Apt. #, Etc.<br><p><b>Suite 900</b></p> City<br><p><b>Miami</b></p> <div style="display: flex; justify-content: space-between;"> <div>State<br/><b>FL</b></div> <div>Zip Code<br/><b>33131</b></div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                   |                                                                                                                                                                                                                 |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.</b><br>Signature of Registered Agent  <b>President</b> Date <b>2/9/01</b><br><div style="text-align: center;">REGISTERED AGENT MUST SIGN</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                   |                                                                                                                                                                                                                 |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Titles</th> <th style="width: 30%;">Name of Officers and/or Directors</th> <th style="width: 30%;">Street Address of Each Officer and/or Director</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td><b>MGR</b></td> <td><b>DeFortuna, Walter</b></td> <td><b>1414 Brickell Avenue</b></td> <td><b>Miami, Florida 33131</b></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>                                                                                                                                      |                                   |                                                                                                                                                                                                                 |                             | Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip | <b>MGR</b> | <b>DeFortuna, Walter</b> | <b>1414 Brickell Avenue</b> | <b>Miami, Florida 33131</b> |  |  |  |  |  |  |  |  |  |  |  |  |
| Titles                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Name of Officers and/or Directors | Street Address of Each Officer and/or Director                                                                                                                                                                  | City / State / Zip          |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>MGR</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>DeFortuna, Walter</b>          | <b>1414 Brickell Avenue</b>                                                                                                                                                                                     | <b>Miami, Florida 33131</b> |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   |                                                                                                                                                                                                                 |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   |                                                                                                                                                                                                                 |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401 F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(a) F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.</b><br>SIGNATURE:  <b>attorney at law</b><br><div style="text-align: center;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</div> |                                   |                                                                                                                                                                                                                 |                             |        |                                   |                                                |                    |            |                          |                             |                             |  |  |  |  |  |  |  |  |  |  |  |  |

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