

L99000009062

PLEASE RECALL THIS FORM BEFORE COMPLETING THIS FORM

FILED

LIMITED LIABILITY COMPANY REINSTATEMENT



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

02 JUN 28 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000009062

Limited Liability Company's Name

Coastal Apartments, L.L.C.

1. Principal Office Address

672 Brent Lane

Suite, Apt. #, etc.

City & State

Pensacola, FL

Zip

32503

Country

USA

2. Mailing Office Address

672 Brent Lane

Suite, Apt. #, etc.

City & State

Pensacola, FL

Zip

32503

Country

USA

4. State/Country of Formation

Florida, USA

5. Date Organized or Qualified
To Do Business in Florida

12/20/1999

6. FEI Number

59-3614797

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a Certificate of Status

2001-2002

8. Name and Address of Current Registered Agent

Name

Robert W. Kimball

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

672 Brent Lane

Suite, Apt. #, Etc.

City

Pensacola

State

FL

Zip Code

32503

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07/02/02 01/58--032

***205.00 ***205.00

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

9. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MANGR	Robert W. Kimball	672 Brent Lane	Pensacola, FL 32503

REINSTATEMENT 2001-02

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 5/8/02

Daytime Phone # (850) 474-0900

Typed or printed name of signing Managing Member/Manager Robert W. Kimball