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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



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

02 JUN 17 PM 4:42

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # M000000000927

1. Limited Liability Company's Name

CSI at Red Stick, LLC

MJH

2. Principal Office Address

8350 58th Ave

Suite, Apt. #, etc.

3. Mailing Office Address

PO Box 36

Suite, Apt. #, etc.

City & State

Vero Beach, FL

City & State

Pinehurst, NC

Zip

32967

Country

USA

Zip

28370

Country

USA

4. State/Country of Formation

DELAWARE

5. Date Organized or Qualified

To Do Business in Florida 5-12-00

6. FEI Number

56-2187912

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

Dan Costello

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

40 Red Stick Golf Club

Suite, Apt. #, Etc.

8350 58th Avenue

City

Vero Beach

State

FL

Zip Code

32967

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****205.00 ****205.00

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

Dan Costello

REGISTERED AGENT MUST SIGN

Date 6-11-02

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
MGT	CADDIE SERVICES INC.	200 Westgate Dr. Suite B, Hwy 211w	Pinehurst, NC 28374
			150.00 - Adm
			50.00 - CF
			5.00 - Cert

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

Michael A. Granuzzo

Date 6-11-02

Daytime Phone #

910-255-0220

Typed or printed name of signing Managing Member/Manager

Michael A. Granuzzo, CEO of Managing Member

CR2E041 (9/01)