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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

1082

APPLICATION FOR REINSTATEMENT

**MD 000000899**

DIVISION OF CORPORATIONS

03 DEC 30 PM 2:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. DOCUMENT # M01000000899

Name and Mailing Address

0014825 01 AB 0.301 \*\*AUTO H5 0 0615 10018-370499



TB BUNGALOW ST. AUGUSTINE, LLC  
1071 6TH AVENUE, 11TH FLOOR  
NEW YORK NY 10018-3704



2. New Mailing Address		4. State/Country of Formation DE	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 04/24/2001	
Principal Place of Business 2700 STATE ROAD 16 #1005B ST. AUGUSTINE FL 32092	3. New Principal Place of Business Address City, State, Zip	6. FEI Number 13-4152737	Applied For Not Applicable
8. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 700027063187 01/16/04--01004--007 **150.00 City FL Zip Code	
10. 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 <i>Lynette Coleman</i> <b>REQUIRED</b> as its agent Date <i>12/30/03</i> REGISTERED AGENT MUST SIGN			
11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	MARGOLIS, TONY	1071 6TH AVE 11TH FLOOR	NEW YORK NY 10018
MGRM	KONG, KEN	1071 6TH AVE 11TH FLOOR	NEW YORK NY 10018
MGRM	GOLDSTEIN, BRAD	1071 6TH AVE 11TH FLOOR	NEW YORK NY 10018
Please see attached statement			
12. 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 <i>J. Reese Lanier, Jr.</i> <b>REQUIRED</b>		Date 12/24/2003 Daytime Phone # (404)-659-2424	
Typed or printed name of signing Managing Member/Manager J. Reese Lanier, Jr.		REINSTATEMENT 03 AL	

CR2E084 (7/03)

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TB Bungalow St. Augustine, LLC  
Block 11 Information

Title(s)	Name of Managing Members/ Manager	Street Address	City/State/Zip
MGRM	Tommy Bahama R&R Holdings, Inc.	1071 Avenue of the Americas	New York Ny 10018
MGR	J. Hicks Lanier	222 Piedmont Avenue NE	Atlanta, GA 30308
MGR	Thomas Chubb III	222 Piedmont Avenue NE	Atlanta, GA 30308
MGR	J. Reese Lanier, Jr.	222 Piedmont Avenue NE	Atlanta, GA 30308