

MO2000000625

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # MO2 000000625

1. Limited Liability Company's Name

Ocean East Improvements, LLC

03

BK

2006 FEB 24 PM 4:17  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
CR2E041 (8/05)

2. Principal Office Address

410 DLC Management Corp.

3. Mailing Office Address

410 DLC Management Corp.

Suite, Apt. #, etc.

580 White Plains Rd.

Suite, Apt. #, etc.

580 White Plains Road

City & State

Tarrytown, NY

City & State

Tarrytown, NY

Zip

10591

Country

Zip

10591

Country

4. State/Country of Formation

Delaware

5. Date Organized or Qualified  
To Do Business in Florida

3/8/02

6. FEI Number

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

NRAI Services, Inc.

500067314705

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

2731 Executive Park Dr Ste 4

03/07/06--01029--021 \*\*10.00

Suite, Apt. #, Etc.

City

Weston

State

FL

Zip Code

32331

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

Adrian Hand NASST SEC

Date 2/24/06

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
MGKM	First Man Ocean East Corp.	580 White Plains Road.	Tarrytown, NY 10591
			500067314705 03/07/06--01029--022 **200.00
			REINSTATEMENT 2003-2006

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. Ocean East Improvements, LLC  
Bt. First Man Ocean East Corp.

Signature of  
Managing Member/Manager

Adrian Hand

Date

Daytime Phone # (914) 631-3131

Typed or printed name of signing Managing Member/Manager Adrian Hand, President

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