

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 FEB 20 PM 1:35

DOCUMENT # M04000003390

1. Limited Liability Company's Name

Elston/LaJolla, L.L.C.

400117825844
02/12/08--01013--014 **660.00

CR2E041 (12/07)

2. Principal Office Address - No P.O. Box #

38304 North Shore Ave

Suite, Apt. #, etc.

3. Mailing Office Address

38304 North Shore Ave

Suite, Apt. #, etc.

City & State

Beach Park, Illinois

City & State

Beach Park, Illinois

Zip

60087

Country

Cook

Zip

60087

Country

USA

4. State/Country of Formation

Illinois

5. Date Organized or Qualified
To Do Business in Florida

8/19/2004

6. FEI Number

36-4054643

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

Allen Greenwald

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

c/o GREENWALD GROUP - 7301 SW 57th Court

Suite, Apt. #, Etc.

Ste. 565

City

South Miami

State

FL

Zip Code

33143

☐ A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.

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

[Signature]

REGISTERED AGENT MUST SIGN

Date January 12, 2008

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
MGR	Elston Holdings, LLC	38304 North Shore Ave	Beach Park, Illinois 60087

REINSTATEMENT 2005-08

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

[Signature]

Date Jan 12, 2008

Daytime Phone # 847-782-1266

Typed or printed name of signing Managing Member/Manager

Elston Holdings, LLC, Manager, by Louis Greenwald, its Manager