

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 DEC 23 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # mos 000006892

1. Limited Liability Company's Name

Tuscany Ranch Partners, LLC

CR2E041 (10/08)

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

670 W. Colbert Ct.

Suite, Apt. #, etc.

City & State

Beverly Hills, FL

Zip

34465

Country

USA

3. Mailing Office Address

P.O. 640001

Suite, Apt. #, etc.

City & State

Beverly Hills, FL

Zip

34464-0001

Country

USA

4. State/Country of Formation

Delaware USA

5. Date Organized or Qualified

To Do Business in Florida 11-13-2006

6. FEI Number

20-3943682

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

Ronald J. Collins

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

35 St. George Place

Suite, Apt. #, Etc.

City

Palm Beach Gardens

State

FL

Zip Code

33418

☐ 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

Ronald J. Collins
REGISTERED AGENT MUST SIGN

Date 12-19-08

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	Ronald J. Collins	35 St. George Place	Palm Beach Gardens, FL 33418
MGR	Taylor B. Collins	35 St. George Place	Palm Beach Gardens, FL 33418
MGR	John W. Patton III	670 W. Colbert Ct.	Beverly Hills, FL 34465
CFO	Dale R. Miller	670 W. Colbert Ct.	Beverly Hills, FL 34465

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REINSTATEMENT

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

John W. Patton III

Date 12-19-08

Daytime Phone # 352 746-771 X 17

Typed or printed name of signing Managing Member/Manager John W. Patton III