


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2016 OCT 11 AM 4:29

DOCUMENT # M0700001377

1. Limited Liability Company's Name
BRIGHTVIEW LANDSCAPES, LLC

400291137564

W16000069740

CR2ED41 (1/14)

2. Principal Office Address - No P.O. Box #
401 Plymouth Road

3. Mailing Office Address
401 Plymouth Road

Suite, Apt. #, etc.
5th Floor

City & State
Plymouth Meeting, PA

Zip Country
19462 USA

4. State/Country of Formation
Delaware

5. Date Organized or Qualified To Do Business in Florida
03/08/2007

6. FBI Number
42-1724313

7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a certificate of status

8. Name and Address of Current Registered Agent

Name
C T CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable) Suite,
1200 SOUTH PINE ISLAND ROAD

Apt. #, Etc.
SUITE 250

City State Zip Code
PLANTATION FL 33324

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of Registered Agent Kathryn A. Widdoes Kathryn A. Widdoes, Asst. Secretary Date 10/14/16

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Authorized Representatives/Managers (Continued on the attached)

Titles	Name of Authorized Representative/Managers	Street Address of Each Authorized Representative/Manager	City / State / Zip
AR	Pat Velasco	401 Plymouth Road, 5th Floor	Plymouth Meeting, PA 19462
AR	Jeff Herold	401 Plymouth Road, 5th Floor	Plymouth Meeting, PA 19462
AR	Jonathan Gottsegen	401 Plymouth Road, 5th Floor	Plymouth Meeting, PA 19462
AR	John Feenan	401 Plymouth Road, 5th Floor	Plymouth Meeting, PA 19462
AR	Robert Tyler	401 Plymouth Road, 5th Floor	Plymouth Meeting, PA 19462
AR	Henry Celotto	401 Plymouth Road, 5th Floor	Plymouth Meeting, PA 19462

11. E-mail Address: _____
(To be used for future annual report notifications)

12. I certify that I am an authorized representative/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement of section 605.0012, 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 617.155, F.S.

Signature of authorized representative/member Jonathan Gottsegen Date 10/10/2016 Daytime Phone # (240) 683-2000

Typed or printed name of signing authorized representative/member Jonathan Gottsegen

BRIGHTVIEW LANDSCAPES, LLC

DOCUMENT # M07000001377

10. Names and Street Addresses of Authorized Representatives/Managers (Continued)

Titles	Name of Authorized Representatives/Managers	Street Address of Each Authorized Representative/Manager	City / State / Zip
AR	Erica Irvin	401 Plymouth Road, 5th Floor	Plymouth Meeting, PA 19462
AR	Susan DeSantis	401 Plymouth Road, 5th Floor	Plymouth Meeting, PA 19462
AR	Dave Hanson	24151 Ventura Blvd	Calabasas, CA 91302

CT CORP C/O SUNSHINE CORPORATE

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

850-508-1891 (cell)

Date: 10/11/16

ACCT. I2016000072

Ima [Signature]

Name:	Brightview Landscapes, LLC
Document #:	
Order #:	

Certified Copy of Arts & Amend:				
Plain Copy:	<input checked="" type="checkbox"/>			
Certificate of Good Standing:				
Apostille/Notarial Certification:			Country of Destination:	
			Number of Certs:	

Filing:	Certified:
	Plain:
	COGS:

Availability	_____
Document	_____
Examiner	_____
Updater	_____
Verifier	_____
W.P. Verifier	_____
Ref#	_____

Amount: \$ 238.75

16 OCT 11 PM 10 20
SUFFICIENCY OF FILINGS

Thank you!