

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M07000004873

1. Limited Liability Company's Name

Timber assets I, LLC

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

1975 Brookview Drive

Suite, Apt. #, etc.

City & State

Saline, MI

Zip

48176

Country

USA

3. Mailing Office Address

1975 Brookview Drive

Suite, Apt. #, etc.

City & State

Saline, MI

Zip

48176

Country

USA

8. Name and Address of Current Registered Agent

Name

William Roy

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

1117 2nd Ave. S.

Suite, Apt. #, Etc.

City

Terre Verde

State

FL

Zip Code

33715

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 7-31-12

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
MGRM	Richard G Timmons	1975 Brookview Drive	Saline, MI 48176

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. 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.817.155, F.S.

Signature of Managing
Member/Manager

Richard G. Timmons

Date 7/30/2012

Daytime Phone # 734-657-1988

Typed or printed name of signing Managing Member/Manager Richard G Timmons

FILED

12 SEP 10 AM 10:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

2010-11 SCH

600238536036
09/10/12--01002--004 **138.75

CR2E041 (1/11)

4. State/Country of Formation

Michigan

5. Date Organized or Qualified
To Do Business in Florida

08/09/2007

6. FEI Number

202065316

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

E-mail Address:

600238536036
08/15/12--01019--011 **238.75

rtimmons1975@aol.com

(To be used for future annual report notices)