

MO7000007098 ^{2 of 2}

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LIMITED LIABILITY REINSTATEMENT
GATEWAY LIGHTHOUSE POINT, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$521.25

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M07000007098

1. Limited Liability Company's Name

Gateway Lighthouse Point, LLC

CR2ED41 (1/11)

2. Principal Office Address - No P.O. Box # 141 Island Sanctuary		3. Mailing Office Address 141 Island Sanctuary	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Vero Beach, FL		City & State Vero Beach, FL	
Zip 32963	Country USA	Zip 32963	Country USA
4. State/Country of Formation Delaware		5. Date Organized or Qualified To Do Business In Florida 12/6/2007	
6. FEI Number		☒ Applied For ☐ Not Applicable	
7. CERTIFICATE OF STATUS DESIRED ☐		\$5.00 Additional Fee required for Certificate of Status	
8. Name and Address of Current Registered Agent Name James E. Archer Street Address (P.O. Box Number is Not Acceptable) 141 Island Sanctuary Suite, Apt. #, Etc. City Vero Beach State FL Zip Code 32963		E-mail Address: jimaichergsh@aol.com (To be used for future annual report notices)	

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

James E. Archer
REGISTERED AGENT MUST SIGN

Date 11/7/11

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Member/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	James E. Archer	141 Island Sanctuary	Vero Beach, FL 32963

REINSTATEMENT 09-1198

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 608.408, 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

James E. Archer
James E. Archer

Date 11/7/11

Daytime Phone # 561-987-2292

Typed or printed name of signing Managing Member/Manager James E. Archer