

108000004802

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H130000771183)))



H130000771183ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

File 1st

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

Email Address: _____

RECEIVED
13 APR -5 PM 12:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY REINSTATEMENT
ORANGE COUNTY CONTAINER GROUP, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$793.75

FILED
2013 APR -5 AM 8:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS																													
DOCUMENT # M08000004802																															
1. Limited Liability Company's Name Orange County Container Group LLC																															
2. Principal Office Address - No P.O. Box # 13400 E. Nelson Avenue Suite, Apt. #, etc.		3. Mailing Office Address same Suite, Apt. #, etc.																													
City & State City of Industry, CA		City & State City of Industry, CA																													
Zip 91746	Country USA	Zip 91746	Country USA																												
4. State/Country of Formation Delaware		5. Date Organized or Qualified To Do Business in Florida 10/30/2008																													
6. FEI Number 80-0227704		Applied For ☐ Not Applicable																													
7. CERTIFICATE OF STATUS DESIRED ☐		\$9.00 Additional Fee required for a Certificate of Status.																													
8. Name and Address of Current Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Suite, Apt. #, Etc.		E-mail Address: dennis.hegedus@occg.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 <u>Connie Bryan</u> Date <u>4/5/2013</u> REGISTERED AGENT MUST SIGN <u>Assistant Secretary</u>																															
10. Names and Street Addresses of Managing Members/Managers <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Title</th> <th style="width: 30%;">Name of Managing Member/ Manager</th> <th style="width: 30%;">Street Address of Each Managing Member/ Manager</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>Mgr</td> <td>David A. Nelson</td> <td>855 E. US Highway 80</td> <td>Forsyth, TX 75126</td> </tr> <tr> <td>Mgr</td> <td>Juan Guillermo Castaneda</td> <td>1000 Sawgrass Corporate Pkwy, Suite 120</td> <td>Sunrise, FL 33323</td> </tr> <tr> <td>Mgr</td> <td>Brian McDonnell</td> <td>13400 E. Nelson Avenue</td> <td>City of Industry, CA 91746</td> </tr> <tr> <td>Mgr</td> <td>Gregory Hall</td> <td>13400 E. Nelson Avenue</td> <td>City of Industry, CA 91746</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				Title	Name of Managing Member/ Manager	Street Address of Each Managing Member/ Manager	City / State / Zip	Mgr	David A. Nelson	855 E. US Highway 80	Forsyth, TX 75126	Mgr	Juan Guillermo Castaneda	1000 Sawgrass Corporate Pkwy, Suite 120	Sunrise, FL 33323	Mgr	Brian McDonnell	13400 E. Nelson Avenue	City of Industry, CA 91746	Mgr	Gregory Hall	13400 E. Nelson Avenue	City of Industry, CA 91746								
Title	Name of Managing Member/ Manager	Street Address of Each Managing Member/ Manager	City / State / Zip																												
Mgr	David A. Nelson	855 E. US Highway 80	Forsyth, TX 75126																												
Mgr	Juan Guillermo Castaneda	1000 Sawgrass Corporate Pkwy, Suite 120	Sunrise, FL 33323																												
Mgr	Brian McDonnell	13400 E. Nelson Avenue	City of Industry, CA 91746																												
Mgr	Gregory Hall	13400 E. Nelson Avenue	City of Industry, CA 91746																												
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.817.156, F.S. Signature of Managing Member/Manager <u>Brian McDonnell</u> Date <u>4/4/2013</u> Daytime Phone # <u>(626) 333-6363</u> Typed or printed name of signing Managing Member/Manager <u>Brian McDonnell</u>																															

FILED
 2013 APR -5 AM 8:37
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

CR2E041 (1/11)