

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY
COMPANY
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Limited Liability Company's Name

Savannah Court, LLC

REINSTATEMENT 2000

2. Principal Office Address 11301 N. Congress Avenue		3. Mailing Office Address Same		4. State/Country of Formation Delaware	
Suite, Apt. #, etc. Suite 130		Suite, Apt. #, etc.		5. Date Organized or Qualified To Do Business in Florida 08/07/98	
City & State Boynton Beach, FL		City & State		6. FEI Number 65-0851992	
Zip 33426	Country USA	Zip	Country	7. CERTIFICATE OF STATUS DESIRED ☒	

8. Name and Address of Current Registered Agent

Name
Pamela J. Waldorf, Esq.

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

Winthrop, Stimson, Putnam & Roberts, 125 Worth Avenue

Suite, Apt. #, Etc.

Suite 310

City

Palm Beach

State
FL

Zip Code

33480

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*Pamela J. Waldorf*

Date

11/10/00

REGISTERED AGENT MUST SIGN

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	Atlantic Capital Investment Group, LLC	c/o Chuan S. Wang, CFO 11301 N. Congress Avenue Suite 130 Boynton Beach, FL 33426	

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 complies with 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.

Atlantic Capital Investment Group, LLC

Signature of
Managing Member/Manager

by:

Chuan S. Wang

Date

11/10/00

Daytime Phone # 561/735-0075

Typed or printed name of signing Managing Member/Manager

Chuan S. Wang, Chife Financial Officer

ACC.