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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

AR[redacted]AT[redacted]O[redacted]A DEPARTMENT OF STATE
[redacted]R
REINSTATEMENT
Secretary
DIVISION OF [redacted]

M99000001935

APPROVED AND FILED
03 FEB -6 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # M99000001935

Name and Mailing Address

0007970 01 FP 0.352 **PRSRT T4 0 0615 45439-146500

MILLER-VALENTINE PARTNERS LTD. L.C.
4000 MILLER-VALENTINE COURT
DAYTON OH 45439-1465

300009404673
12/06/02--01094--002 **150.00

2002-2003

REINSTATEMENT

2. New Mailing Address

City, State, Zip

4. State/Country of Formation
OH

5. Date Organized or Qualified To Do Business in Florida
12/08/1999

Principal Place of Business
4000 MILLER-VALENTINE COURT
DAYTON OH 45439

3. New Principal Place of Business Address

City, State, Zip

6. FEI Number
31-1451373
☐ Applied For
☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

CR2E084 (8/02)

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

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

300009404673
02/06/03--01042--001 **50.00

City FL Zip Code

10. 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 Barbara A Burke BABARA A. BURKE SPECIAL ASSISTANT SECRETARY 1-2-03

REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	MILLER, GERALD M	3624 WOOD HOLLOW RD.	DAYTONOH 45429
MGRM	MILLER, JAMES M	5081 ROLLING WOODS TRAIL	DAYTONOH 45429
MGR	KECK, WILLIAM F	9428 TRAILSTONE POINT	DAYTONOH 45458
MGR	MONNIG, BERNARD W III	2780 GRAFT MILL RD.	BELLBROOK OH 45305
MGRM	DRUL, WILLIAM H II	4345 TRAILS END DRIVE	DAYTONOH 45429
MGR	ALDRIDGE, AVERIL D	939 HAMPTON RD. SOUTH	NEW CARLISLE OH 45344

JB

12. 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.

Signature of Managing Member/Manager William F. Keck Date 12/3/02 Daytime Phone # (937) 293-0900

Typed or printed name of signing Managing Member/Manager Member William F. Keck