2004 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 20, 2004
Secretary of State

DOCUMENT# L00000000495

Entity Name: USA LIFT LLC

Current Principal Place of Business:

17830 NE 5TH AVE
MIAMI, FL 33162

New Principal Place of Business:

5640 COLLINS AVE.
SUITE 6 B
MIAMI BEACH, FL 33140

Current Mailing Address:

17830 NE 5TH AVE
MIAMI, FL 33162

New Mailing Address:

5640 COLLINS AVE.
SUITE 6 B
MIAMI BEACH, FL 33140

FEI Number: 65-0974346 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BEALE, ARTHUR
17830 NE 5TH AVE
MIAMI, FL 33162 US

Name and Address of New Registered Agent:

BEALE, ARTHUR
5640 COLLINS AVE.
SUITE 6 B
MIAMI BEACH, FL 33140 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ARTHUR BEALE 10/20/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: BEALE, ARTHUR
Address: 5640 COLLINS AVE., #6-B
City-St-Zip: MIAMI BEACH, FL 33140

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: MORA, BARBARA
Address: 5640 COLLINS AVE. # 6-B
City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BARBARA MORA MGRM 10/20/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date