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LIMITED LIA COMPA REINSTATE	NY (	Secre	PARTMENT OF etary of State of Corporation						
DOCUMENT # 10100003664  Limited Liability Company's Name					03 OCT -2 PM 3:54  SECALIARY, U. SHALL TALLAHASSEE, FLORIDA				
BAROLO, LLC					400023671554 10/03/0301070003 **150.00				
Principal Office Address 3. Mailli				_					
400 E LA	S OLAS BLUD.					try of Formation			
uite, Apt. #, etc. Suite, Apt					FLOR 5. Date Organ	IDA JUSA ized or Qualified			
SUITE A SUIT					To Do Busi	ness in Florida	109/200	L L	
•				CI	6. FEI Numbe			plied For	
POKI LAU	Country	Zip Zip	LUDERDALE	, PL_		<u>-1087 882</u>		t Applicable	
33301	U.S.A.	33301	U.S.	A.	7. CERTIFICATE	OF STATUS DESIRED	S5.00 Additional for a Certificat	Fee required to of Status	
8. Name and Address of Current Registered Agent									
Name									
	FREDERICO PESSO A LINS  Street Address (P.O. Box Number is Not Acceptable)								
	2400 E LAS OLAS BLVD. SUITE A								
Suite, Apt. #, Etc.									
SUITE A City State Zip Code									
FORT LAUDERDALE							30[		
I, being appointed	the registered agent of the abo	ve named limited liabil	lity company, am fam	iliar with and	accept the obligati	ions of Chapter 608, F	s.		
REGISTERED AGENT MUST SIGN  Date 9/30/2003									
O Name and Stra	et Addresses of Managing Men								
Titles	Name of Managing Members/Manage		Street Address of Each Managing Member/ Manager			City / State / Zip			
MANAG MAG	ZISA BIASI S	1LVA 24	100 E LAS	OLAS	BLVD. STE A	FORT LAUC	seedale/fl	33301	
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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 fluig 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

Typed or printed name of signing Managing Member/Manager \_

Date 9/30/2003 Daytime Phone # 954.712.0580