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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2002-2003
LIMITED LIABILITY COMPANY
REINSTATEMENT
LEBR



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # *L01000006879*

1. Limited Liability Company's Name
 ABCD EQUIPMENT LEASING, LLC

FILED
 03 AUG -5 AM 11:33
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

500022070205
 08/05/03--01044--020 **100.00

2. Principal Office Address 3155 ORION DRIVE		3. Mailing Office Address SAME		4. State/Country of Formation FLORIDA	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Date Organized or Qualified To Do Business in Florida APRIL 30, 2001	
City & State COLORADO SPRINGS, CO		City & State		6. FEI Number 84-1612465	
Zip 80906	Country USA	Zip	Country	7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
Applied For		Not Applicable			

8. Name and Address of Current Registered Agent

Name
LOUIS M. MEINERS, JR.

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

Suite, Apt. #, Etc.
SUITE 2

City
NAPLES

State
FL

Zip Code
34104

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 *Louis M. Meiners Jr.* Date JULY 22, 2003

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
MEM	C. BRYAN CARR	3155 ORION DRIVE	COLORADO SPRINGS, CO 80906
MEM	AMY C. CARR	3155 ORION DRIVE	COLORADO SPRINGS, CO 80906

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.

Signature of Managing Member/Manager *C. Bryan Carr* Date 7/23/2003 Daytime Phone # (719) 634-8775

Typed or printed name of signing Managing Member/Manager C. BRYAN CARR

CR2ED41 (10/02)

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ABCD EQUIPMENT LEASING, LLC

3155 ORION DRIVE
COLORADO SPRINGS, CO 80906
(719) 634-8775

July 22, 2003

Florida Department of State
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

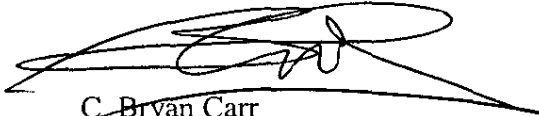
RE: ABCD Equipment Leasing, LLC Document # L01000006879

Dear Sir or Madam:

The Uniform Business Report for this company was never received by our office, and therefore it was never completed. We request that any penalties and late fees be waived for this reason. I have attached the Company Reinstatement Form for ABCD Equipment Leasing, LLC, along with the \$100 fee for payment of the Uniform Business Report for 2002 and 2003. I spoke with a representative from your office and was told this amount. The Document Number is L01000006879.

Thank you for your assistance in this matter. Upon receipt, I can be reached at (719) 634-8775.

Sincerely,



C. Bryan Carr
Member