
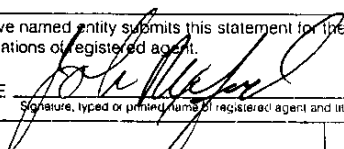
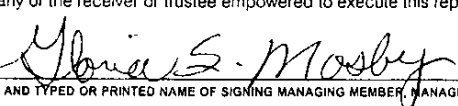


2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L01000019310 1. Entity Name GLO INVESTMENTS, L.L.C.		 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 06 OCT 13 AM 9:34
Principal Place of Business 3300 43RD AVE STE'S 4 & 5 VERO BEACH, FL 32960		Mailing Address 3300 43RD AVE STE'S 4 & 5 VERO BEACH, FL 32960
2. Principal Place of Business 837 8TH STREET		3. Mailing Address 837 8TH STREET
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State VERO BEACH, FL		City & State VERO BEACH, FL
Zip 32962		Country USA
4. FEI Number 48-2012222		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent SEGAL, BARRY G ESQ. 2801 OCEAN DRIVE SUITE 204 VERO BEACH, FL 32963		7. Name and Address of New Registered Agent Name John Rextford Street Address (P.O. Box Number is Not Acceptable) 837 8th Street City VERO BEACH FL Zip Code 32962
8. 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. I am familiar with, and accept the obligations of, registered agent. SIGNATURE  DATE 10-11-06 <small>(NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$50.00 After January 1, 2007, Fee will be \$100.00		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.
Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM REXFORD, JOHN 837 8TH STREET VERO BEACH, FL 32960	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500090924355 10/13/06--01033--027 **50.00
<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MGRM MOSBY, RANDY 3300 43RD AVE STE;S 4&5 VERO BEACH, FL 32960
<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MGRM MOSBY, GLORIA 3300 43RD AVE STE'S 4&5 VERO BEACH, FL 32960
<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition REINSTATEMENT 2006
<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 		Date 10/10/06 Daytime Phone # 772-563-0334
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		