

-PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10-21-04
250.00

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR -3 AM 10:45

DOCUMENT # L02000016687

1. Limited Liability Company's Name

MM & B PROPERTIES, L.L.C.

800068100818
03/20/06--01019--012 **250.00
CR2E041 (8/05)

2. Principal Office Address
10317B CROSS CREEK BLVD

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
TAMPA, FLORIDA

City & State

Zip
33647

Country
USA

Zip

Country

4. State/Country of Formation
FLORIDA/HILLSBOROUGH

5. Date Organized or Qualified
To Do Business in Florida 07/02/2002

6. FEI Number
010726071

Applied For
Not Applicable

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

8. Name and Address of Current Registered Agent

Name
GREGORY C. STEPANSKI

Street Address (P.O. Box Number is Not Acceptable)
10317B CROSS CREEK BLVD

Suite, Apt. #, Etc.

City
TAMPA

State
FL

Zip Code
33647

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 Gregory C. Stepanski
REGISTERED AGENT MUST SIGN

Date 2/7/06

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	GREGORY C. STEPANSKI	10317B CROSS CREEK BLVD	TAMPA, FLORIDA 33647

REINSTATEMENT 04-06

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 Gregory C. Stepanski Date 2/7/06 Daytime Phone # (813) 973-3100

Typed or printed name of signing Managing Member/Manager GREGORY C. STEPANSKI