

L0200027205

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

03 NOV -5 AM 8:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT #

1. Limited Liability Company's Name

1528-1650 Brickell Ave. Lofts Venture, LLC

500023863525 10/16/03--01088--004 **150.00

2. Principal Office Address

1110 Brickell Avenue Suite, Apt. #, etc. 804

3. Mailing Office Address

1110 Brickell Avenue Suite, Apt. #, etc. 804

4. State/Country of Formation

Florida

5. Date Organized or Qualified To Do Business in Florida

10/15/2002

6. FEI Number

33-102-6677

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

Omega Alpha Engineering USA Corp.

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

1110 Brickell Avenue

Suite, Apt. #, Etc.

804

City

miami

State

FL

Zip Code

33131

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

[Handwritten Signature]

Date

10/13/03

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
MGR	Omega Alpha Engineering USA Corp.	1110 Brickell Avenue, Ste 804	Miami, FL 33131

REINSTATEMENT

03 Dec

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

[Handwritten Signature]

Date

10/13/03

Daytime Phone #

305-341-6220

Typed or printed name of signing Managing Member/Manager

Alfredo Acosta / Omega Alpha Eng USA

CR2E04 (10/02)