

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L03000011681

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED 2006 JAN 10 AM 10:29 TALLAHASSEE, FLORIDA SECRETARY OF STATE

BX

DOCUMENT #

1. Limited Liability Company's Name MD WEBSITES LLC

2. Principal Office Address

1100 5TH AVE South

Suite, Apt. #, etc. Suite 201

City & State Naples Fla

Zip 34102 Country U.S.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip Country

4. State/Country of Formation

Collier

5. Date Organized or Qualified To Do Business in Florida

6. FFI Number

Applied For Not Applicable

7. CERTIFICATE OF STATUS DESIRED

\$5.00 Additional Fee required for a Certificate of Status

B. Name and Address of Current Registered Agent

Name Jeff Rolquin

Street Address (P.O. Box Number is Not Acceptable) 1100 5th Ave South Suite 201 400064058524 01/19/06--01027--010 \*\*\*100.00

Suite, Apt. #, Etc. Naples Fla 34102

City State Zip Code FL

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 [Signature] Date Jan 9, 2005 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
Pres	JEFF C. ROLQUIN	1100 5TH AVE South #201	Naples Fla 34102
Mgr	CHIP WALK	1100 5TH AVE South #201	Naples Fla 34102

REINSTATEMENT 2005-2006

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 corrected, the limited liability company name satisfies the requirements of section 608.405, 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 [Signature] Date Jan 9, 2005 Daytime Phone # 239-593-6216

Typed or printed name of signing Managing Member/Manager

CREATED (3/95)



L0300011681

2005 JAN 10 AM 10:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED

January 9<sup>th</sup>, 2006

Re: Corporate Filing for MD Web Sites LLC

To Secretary of State,

This letter is to explain that we did **not** receive our annual renewal for the MD Web Sites LLC for the years 2005 and 2005 and wish to reinstate the company for the normal filing fees owed to the state.

We appreciate your understanding in this matter and attached is our form and payment to be processed.

Respectfully yours,

  
Jeff L. Roloff, President  
MD Web Sites LLC

If you should have any questions, please don't hesitate to call us at 239 593-6216 or via e-mail at [mdbcorpusa@yahoo.com](mailto:mdbcorpusa@yahoo.com)

1100 5<sup>th</sup> Avenue South , Suite 201 Naples , Florida 34102  
239 593-6216 239 593-6217