


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # MD2-2533					
1. Limited Liability Company's Name FRETUS INVESTORS WINTER SPRINGS LLC					
2. Principal Office Address 600 UNIVERSITY ST, STE 2500 Suite, Apt. #, etc.		3. Mailing Office Address 600 UNIVERSITY ST, STE 2500 Suite, Apt. #, etc.		4. State/Country of Formation DELAWARE, USA	
City & State SEATTLE, WA		City & State SEATTLE, WA		5. Date Organized or Qualified To Do Business in Florida 9/24/02	
Zip 98101	Country USA	Zip 98101	Country USA	6. FEI Number	Applied For <input checked="" type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>					

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 TALLAHASSEE, FLORIDA

8. Name and Address of Current Registered Agent

Name
C T CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD

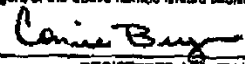
Suite, Apt. #, Etc.

City
PLANTATION

State
FL

Zip Code
33324

9. I, being appointed the registered agent of the above named limited liability company, do hereby accept the obligations of Chapter 605, F.S.

Signature of Registered Agent
 **CORINNE BRYAN**
SPECIAL ASSISTANT SECRETARY Date **2/26/04**

REGISTERED AGENT MUST SIGN

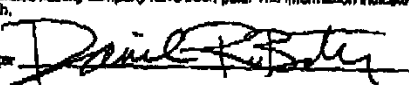
10. Name and Street Addresses of Managing Members/Managers

Title	Name of Managing Member/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	FRETUS INVESTORS LLC	600 UNIVERSITY ST, STE 2500	SEATTLE, WA 98105

REINSTATEMENT

03-04

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 605, 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 605.406, 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
 Date **2/13/04** Daytime Phone# **(206)728-9063**

Typed or printed name of signing Managing Member/Manager **DANIEL R. BATY**

Florida Department of State
Division of Corporations
Public Access System

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Division of Corporations
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From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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LIMITED LIABILITY REINSTATEMENT

FRETUS INVESTORS WINTER SPRINGS LLC

Certificate of Status	0
Certified Copy	0
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