

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
07 DEC 28 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M05000002947

1. Limited Liability Company's Name

1550 THE CHELSEA LLC

07

PK

CR2E041 (1/07)

2. Principal Office Address - No P.O. Box #
2915 BISCAYNE BLVD

3. Mailing Office Address
SAME

Suite, Apt. #, etc.
SUITE 304

Suite, Apt. #, etc.

City & State
MIAMI

City & State

Zip Country
FL 33137

Zip Country

4. State/Country of Formation
DE

5. Date Organized or Qualified To Do Business in Florida 06/02/2005

6. FFI Number
830431242

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
CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET

Suite, Apt. #, Etc.

City
TALLAHASSEE

State Zip Code
FL 32301

mk

A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.

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

Sue G. Knight

Sue G. Knight
as its agent

Date 12-28-07

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	RONALD HARRIS	2915 BISCAYNE BLVD	MIAMI, FL 33137
REINSTATEMENT 2007			
000113483640			

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

R Harris

Date 12/28/07

Daytime Phone # 786 897-6285

Typed or printed name of signing Managing Member/Manager RONALD HARRIS



CORPORATION SERVICE COMPANY

MO 5000002947

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TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032
REFERENCE : 380300 7623603
AUTHORIZATION : *Susie Knight*
COST LIMIT : \$ 150.00 *SHL*

ORDER DATE : December 28, 2007
ORDER TIME : 1:12 PM
ORDER NO. : 380300-010
CUSTOMER NO: 7623603

REINSTATEMENT

NAME: 1550 THE CHELSEA LLC

BK

FILED
07 DEC 28 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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DIVISION OF CORPORATIONS
2007 DEC 28 PM 2:42
TALLAHASSEE, FLORIDA
SUFFICIENCY OF FILING

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS _____