

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

M9900001865

1. DOCUMENT # M9900001865

REINSTATEMENT 2002

0008851 01 FP 0.352 **PRSRT HB 0 0615 10022-863209



AK CAPITAL LLC
445 PARK AVENUE
9TH FLOOR
NEW YORK NY 10022-8632

US



SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 DEC -4 11 170

2. New Mailing Address		4. State/Country of Formation NY	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 11/29/1999	
Principal Place of Business 445 PARK AVENUE 9TH FLOOR NEW YORK NY 10022 US	3. New Principal Place of Business Address City, State, Zip	6. FEI Number 13-4032945	Applied For Not Applicable
8. Name and Address of Current Registered Agent MELO, PETER J 100 COLLINS AVENUE SUITE 4 MIAMI FL 33139		7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

9. Name and Address of New Registered Agent	
Name Peter J. Melo	Street Address (P.O. Box Number is Not Acceptable) 1000 South Pointe Drive, Suite 10
City Miami	Zip Code FL 33139

10. 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 11-14-02

REGISTERED AGENT MUST SIGN

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	KOWALCZYK, ANDREW	445 PARK AVENUE, 9TH FLOOR	NEW YORK NY 10022
			300009356163 12/04/02--01090--001 **155.00
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12. 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 Andrew Kowalczyk Date 11-14-02 Daytime Phone # 786-276-7570

Typed or printed name of signing Managing Member/Manager Andrew Kowalczyk

CR2E084 (8/02)