

APPLI IN  
FOR  
STATEMENT

IN THE STATE OF NEW YORK  
IN GOD WE TRUST

Division of Corporations  
JUL 10 1964

SECRETARY OF STATE

FILED

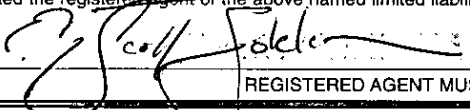
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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[illegible]

GOLD CONSULTING, LLC  
17220 NW 78TH AVENUE  
ALACHUA FL 32615-7621

<b>2. New Mailing Address</b>  City, State, Zip: _____		<b>4. State/Country of Formation</b> FL																																	
<b>Principal Place of Business</b> 17220 NW 78TH AVENUE ALACHUA FL 32615		<b>5. Date Organized or Qualified To Do Business in Florida</b> 01/12/2000																																	
<b>3. New Principal Place of Business Address</b>  City, State, Zip: _____		<b>6. FEI Number</b> 59-3633274																																	
<b>7. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/>		Applied For Not Applicable																																	
<b>8. Name and Address of Current Registered Agent</b>  GOLDEN, E. SCOTT 17220 NW 78TH AVENUE ALACHUA FL 32615		<b>9. Name and Address of New Registered Agent</b>  Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: _____ FL Zip Code: _____																																	
<b>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.</b> Signature of Registered Agent:  _____ Date: 02/20/03 REGISTERED AGENT MUST SIGN																																			
<b>11. Names and Street Addresses of Each Managing Member/Manager</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Title(s)</th> <th style="width: 30%;">Name of Managing Members/Managers</th> <th style="width: 30%;">Street Address of Each Managing Member/Manager</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>GOLDEN, E. SCOTT</td> <td>17220 NW 78TH AVENUE</td> <td>ALACHUA FL 32615</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>				Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MGRM	GOLDEN, E. SCOTT	17220 NW 78TH AVENUE	ALACHUA FL 32615																								
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REINSTATEMENT

02/03

dec

CR2E084 (8/02)

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 [Signature] Date 02/26/03 Daytime Phone # 386-418-0293

Typed or printed name of signing Managing Member/Manager

E. Scott Golden