

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

L00000001274

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

DOCUMENT # L00000001274

1. Limited Liability Company's Name
PARADISE TECHNOLOGY CONSULTANTS LLC

SECRETARY OF STATE
 DIVISION OF CORPORATIONS

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2. Principal Office Address
ONE SOUTHEAST THIRD AVE
 Suite, Apt. #, etc. SUITE 1445
 City & State MIAMI, FL
 Zip 33131 Country USA

3. Mailing Office Address
ONE SOUTHEAST THIRD AVE
 Suite, Apt. #, etc. SUITE 1445
 City & State MIAMI, FL
 Zip 33131 Country USA

4. State/Country of Formation
FLORIDA

5. Date Organized or Qualified To Do Business in Florida
1/31/2000

6. FEI Number 65-0978204 Applied For Not Applicable

7. CERTIFICATE OF STATUS DESIRED **\$3.00 Additional Fee required for a Certificate of Status**

8. Name and Address of Current Registered Agent

Name BERKOWITZ, RICHARD A 400004702544-6

Street Address (P.O. Box Number is Not Acceptable) 40 BERKOWITZ DICK POLACK & BRANT -12/03/01--01066--023

Suite, Apt. #, Etc. ONE SOUTHEAST THIRD AVE 15TH FLOOR ****150.00 ****150.00

City MIAMI Zip Code 33131

REINSTATEMENT

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 Date 11/20/01

REGISTERED AGENT MUST SIGN

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	BERKOWITZ, RICHARD A	ONE SOUTHEAST THIRD AVE 15TH FLOOR	MIAMI / FL / 33131
MGRM	SCHULTZ, TERRENCE A	ONE SOUTHEAST THIRD AVE 10TH FLOOR	MIAMI / FL / 33131
MGRM	POLACK, RICHARD A	ONE SOUTHEAST THIRD AVE 15TH FLOOR	MIAMI / FL / 33131
MGRM	BRANT, BARRY M	ONE SOUTHEAST THIRD AVE 10TH FLOOR	MIAMI / FL / 33131
MGRM	YOUNG, JOHN F	ONE SOUTHEAST THIRD AVE 15TH FLOOR	MIAMI / FL / 33131
MGRM	ROSENTHAL, GARY E	ONE SOUTHEAST THIRD AVE 10TH FLOOR	MIAMI / FL / 33131

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 Date 11/20/01 Daytime Phone # 305-379-7000

Typed or printed name of signing Managing Member/Manager RICHARD A BERKOWITZ

CR2E041 (9/01)