

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L00000001428

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILE
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # **L03000001428**

1. Limited Liability Company's Name

Advanced Power Technologies of Orlando, LLC

REINSTATEMENT 2001-2003

2. Principal Office Address 3333 S. Congress Avenue		3. Mailing Office Address 3333 S. Congress Avenue	
Suite, Apt. #, etc. Suite 403		Suite, Apt. #, etc. Suite 403	
City & State Delray Beach		City & State Delray Beach	
Zip 33445	Country USA	Zip 33445	Country USA

4. State/Country of Formation Florida/USA	
5. Date Organized or Qualified To Do Business in Florida 02/08/2000	
6. FEI Number 65-0529083	Applied For Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent

Name John L. Brewerton, III c/o John L. Brewerton, III, P.A.		
Street Address (P.O. Box Number is Not Acceptable) 250 North Orange Avenue		
Suite, Apt. #, Etc. Penthouse Suite		
City Orlando	State FL	Zip Code 32801

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 *John L. Brewerton, III* Date 12/12/2003

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
MGRM	Grandis Family Partnership, Ltd.	3333 S. Congress Avenue, Suite 403	Delray Beach, FL 33445

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 *John L. Brewerton, III* as attorney-in-fact Date 12/12/03 Daytime Phone # 407-649-9500

Typed or printed name of signing Managing Member/Manager John L. Brewerton, III, as attorney-in-fact

CR2E041 (10/02)