APPROVE

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

OFFEB 10 AMII: 48 SECRETARY OF SHATE FATE AHASSEE, FEORIDA

DOCUMENT # L00000002443

	od Liability Company's Name ceivables Financing	Group, LLC					W. II	
	pal Office Address	3. Mailing						
3233	West 11th Street	l l	Same		4. State/Country of Formation			
Suite, Apt	. #, etc.	Suite, Apt.	Suite, Apt. #, etc.		Florida / USA			
100			<u> </u>		5. Date Organized or Qualified To Do Business in Florida March 3, 2000			
City & Sta		City & State	City & State					
Houston, Texas				6. FEI Number 59-3662355 Applied For Not Applicable				
7700	8 USA	Zip	Country	7-	TE OF STATUS DESIRED 🗹	\$5.00 Additional Fee for a Certificate of	required	
		8.	Name and Address of Current Regis	tered Agent		To, a sertificate of	Status	
	Joseph M. McFadden				20001223104 2 02/10/0301113001 ** / 55.00			
	Street Address (P.O. Box Numb	er is Not Acceptable)	33.30					
Suite, Apt. #, Etc. City Longwood State Zip Code FL 32775								
9. I, being	appointed the registered agent of the	ne above named limited	d liability company, am familiar with and	accept the obligation	02/19-	2007		
Signature o Registered	of <i>1. La 41</i>	122	SENT MUST SIGN		ns of Chapter 608, F.S. Date	103	CR2E041 (10/02	
10. Name	es and Street Addresses of Managin	g Members/Managers		-			⊣ "	
Titles			Street Address of Each Managing Member/Manager		City / State / Zip			
MGR	John J. Reynolds 3233 West		3233 West 11th Street	Houston, Texas 77008				
MGR Joseph M. McFadden			609 Estates Place		Longwood, Florida 32779-2857			
							\exists	
						·		
all fees	that I am managing member/managis reinstatement application the reasc owed by the limited liability company ade under oath.	ger or the receiver or tr on for dissolution has be have been paid. The in	ustee empowered to execute this appli sen eliminated, the limited liability compa nformation indicated on this application i	any name satisf — ie	or in chapter 608, F.S. I f s the requirements of section te, and my signature shall ha	urther certify that when 608.406, F.S., and that ave the same legal effe	at	
Signature of Managing M	lember/Manager	a MIG	Date 02	2/06/03	aytime Phone # (713) 8	61-0081 ext. 2	03	
Typed or prin	nted name of signing Managing Men	Jos	eph M. McFadden		-y-no i nono r			

J. ROLFE JOHNSON, P.C.

1900 WEST LOOP SOUTH SUITE 1175 HOUSTON, TEXAS 77027

TELECOPIER (713) 621-2880 TELECOPIER (713) 621-2772 E-MAIL: rolfejohns@cs.com

February 7, 2003

VIA FEDERAL EXPRESS

Florida Department of State Secretary of State Division of Corporations Registration Section 409 East Gaines Street Tallahassee, FL 32399

Re: Receivables Financing Group, LLC / L00000002443

Reinstatement to Active Status

Dear Sir or Madam:

Enclosed are a completed and executed Limited Liability Company Reinstatement form for reinstatement of Receivables Financing Group, LLC, a Florida limited liability company, to active status in Florida, and Check No. 1343 in the amount of \$255.00 payable to the Florida Department of State. This includes \$250.00 in fees for reinstatement and penalty for unfiled annual reports for 2001, 2002 and 2003, plus \$5.00 to cover a Certificate of Status upon reinstatement. We represent Receivables Financing Group, LLC, as legal counsel.

Please notify our office and telefax a copy of the Certificate of Status when filed, then return the file-marked document to the undersigned as expeditiously as practicable at the above address.

If you have any questions regarding this request, please contact me at your earliest convenience.

Very truly yours,

J. Rolfe Johnson

JRJ:cb Enclosures