

LATE 2001 50.00
 2002 50.00
 2003 50.00
 FILING 100.00
 250.00
 CERTIFICATE 5.00
 255.00

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JAN - 5 AM 9:36

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # L00000003671

1. Limited Liability Company's Name
Motwani Holdings LLC

2. Principal Office Address
7119 West Broward Blvd

3. Mailing Office Address
7119 West Broward Blvd

4. State/Country of Formation
Florida

5. Date Organized or Qualified To Do Business in Florida

City & State
Plantation FL

6. FEI Number Applied For Not Applicable

Zip Country
33317 Broward

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33317 Broward

7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name
Bauman, Jerome

Street Address (P.O. Box Number is Not Acceptable)
7119 West Broward Blvd

Suite, Apt. #, Etc.

City
Plantation

State Zip Code
FL 33317

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 *[Signature]* Date **12/29/03**

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
President	Ramola Motwani	545 N Fort Lauderdale Beach Blvd	Fort Lauderdale, FL 33304

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 *[Signature]* Date **Dec 04 2003** Daytime Phone # **954-564-2345**

Typed or printed name of signing Managing Member/Manager **Motwani, Ramola**

CR20041 (10/02)