## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

COMPANY REINSTATEMENT		Katherite Harris Secretary of State DIVISION OF CORPORATIONS		01 NOV 16 PM 3: 53	
DOCU	MENT # L000000041	48	,1	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
	ability Company's Name	A STATE OF THE STA	الهراث الواج الأمام المحمد ما أواج	· [화	
J01	HN MARSHALL SCOTT ARC	CHITECTS, L.I.	.C.		
			·		
2. Principal O	Office Address	3. Mailing Office Addr	'ess		
	inehurst Rd			4. State/Country of Formation	
Suite, Apt. #, el	etc.	Suite, Apt. #, etc.		Florida/USA	
· "E"				5. Date Organized or Qualified To Do Business in Florida	
City & State		City & State		04/11/2000 6. FEI Number Applied For	
Dunedi			10-5	59-3640292 Not Applicable	
Zip	Country	Zip	Country	7. SECRETARIO DE CIATUR DECIDED CO SECRETARIO DE CONTROL DE CONTRO	
34698	USA	<u></u>	Address of Current Regis	(transaction of the contract o	
	Street Address (P.O. Box Number is No	ot Acceptable)		300004707053-4-4 -12/06/0101003021	
9. I, being appoint of Registered Age	Suite, Apt. #, Etc.  City  Dunedin  oppointed the registered agent of the above ent  and Greek ddresses of Managing Men	ove named limited liability	ST SIGN	-12/06/0101003011 *****150.00 *****150.00  State Zip Code FL 34698  and accept the obligations of Chapter 608, F.S.  Date U//4/01	
	Suite, Apt. #, Etc.  City  Dunedin  ent	ove named limited liability  ECISTERED AGENT MUS		-12/06/0101003011	
9. I, being apply Signature of Registered Age	Suite, Apt. #, Etc.  City  Dunedin  pointed the registered agent of the aborent  ent  And Gree Addresses of Managing Men  Name of	ove named limited liability  EC.STERED AGENT MUS  mbers/Managers  ers	ST SIGN Street Address of E	-12/06/0101003011	
9. I, being appoint of Registered Age  10. Names a Titles Manager	Suite, Apt. #, Etc.  City  Dunedin  opointed the registered agent of the about the registered agent of the registered agent of the about the registered agent of t	ove named limited liability  COSTERED AGENT MUS  mbers/Managers  ers	ST SIGN  Street Address of E  Managing Member/Ma	-12/06/0101003011	
9. I, being appoint of Registered Age  10. Names a Titles Manager	Suite, Apt. #, Etc.  City  Dunedin  popointed the registered agent of the about the registered agent of	ove named limited liability  COSTERED AGENT MUS  mbers/Managers  ers	Street Address of E Managing Member/Ma Pinehurst Rd.	-12/06/0101003011	



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