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APPROVED
AND
FILED

02 DEC 12 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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12/12/02--01121--008 **150.00

PLEASE READ INSTRUCTIONS FOR COMPLETING THIS FORM
LIMITED LIABILITY COMPANY
REINSTATEMENT
JIM SMITH
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L00000004818
1. Limited Liability Company's Name
PRUDENTIAL AMBASSADOR LLC

2. Principal Office Address 520 Brickell Key Dr. Suite, Apt. #, etc. 0-305 City & State Miami, Florida Zip 33131		3. Mailing Office Address 520 Brickell Key Dr. Suite, Apt. #, etc. 0-305 City & State Miami, Florida Zip 33131	
Country USA		Country USA	

4. State/Country of Formation Florida, USA	
5. Date Organized or Qualified To Do Business in Florida 04/27/2000	
6. FEI Number 65-1010071	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 TRANSGLOBAL CORPORATE ADMINISTRATION	
Street Address (P.O. Box Number is Not Acceptable) 520 Brickell Key Drive	
Suite, Apt. #, Etc. Suite 305	
City Miami	State FL
Zip Code 33131	

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 12/6/02

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
MGR	Svetlana Teshabaeva	520 Brickell Key Dr.#305	Miami, FLorida 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 12/6/02 Daytime Phone # (305) 374-3800

Typed or printed name of signing Managing Member/Manager Svetlana Teshabaeva