


<p>APPLICATION FOR REINSTATEMENT</p>		<p>FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State DIVISION OF CORPORATIONS</p>
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GEILS VENTURES LLC
54 DANBURY RD., #318
RIDGEFIELD CT 06877-4019



2. New Mailing Address		4. State/Country of Formation FL	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 06/15/2000	
Principal Place of Business 54 DANBURY RD., #318 RIDGEFIELD CT 06877	3. New Principal Place of Business Address	6. FEI Number 59-3683402	Applied For
	City, State, Zip	7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	Not Applicable
		\$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent	
MINELLA, ALEXANDRA 2500 SILVER STAR ROAD, SUITE 200 ORLANDO FL 32804	Name <u>Alexander Minella</u>	
	Street Address (P.O. Box Number is Not Acceptable) <u>2500 Silver Star Road, Suite 500</u>	
	City <u>Orlando</u>	FL <u>32804</u>

10. 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 REQUIRED

REGISTERED AGENT MUST SIGN

Date 11/3/03

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	MINELLA, ALEXANDER	54 DANBURY RD. A318	RIDGEFIELD CT 06877
			200024510922 11/07/03--01061--008 **150.00
			REINSTATEMENT 03 dec

12. 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 REQUIRED~~ Date 11/3/03 Daytime Phone # 203-743-6045

Typed or printed name of signing Managing Member/Manager

CR2E034 (7/03)