

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FLORIDA DEPARTMENT OF STATE
L00000007818

FILED

02 DEC 26, AM 9:32

1. DOCUMENT # L00000007818

Name and Mailing Address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0002407 01 FP 0.352 **PRSR T8 0 0615 33155-55500



900 PARKING LOT, LLC
4960 S.W. 72ND AVENUE, SUITE 400
MIAMI FL 33155-5550



2. New Mailing Address 1501 Sunset Dr 2nd FLR Coral Gables FL 33143		4. State/Country of Formation FL	
3. New Principal Place of Business Address 4960 S.W. 72ND AVENUE, SUITE 400 MIAMI FL 33155		5. Date Organized or Qualified To Do Business in Florida 07/03/2000	
6. FEI Number 90-0019253 APPLIED FOR		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 MATTAWAY, RICHARD L 4960 S.W. 72ND AVENUE, SUITE 400 MIAMI FL 33155		9. Name and Address of New Registered Agent Name: L. Richard Mattaway Street Address (P.O. Box Number is Not Acceptable): 1501 Sunset Dr 2nd FLR City: Coral Gables FL Zip Code: 33143	
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] Date: 12/17/02 REGISTERED AGENT MUST SIGN			
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
MGR	THE RICHARD-BRANDON COMPANY	4960 S.W. 72ND AVENUE, SUITE 400	MIAMI FL 33155
900009113069 11/20/02--01066--020--**150.00			
REINSTATEMENT			

CR2E084 (8/02)

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] V.P.

Date

11/2/02

Daytime Phone #

305-662-4221

Typed or printed name of signing Managing Member/Manager

Brandon Lurie