

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

L 00000010271

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 JAN 13 AM 11:07
WLO/23/04

DOCUMENT # L 00000010271

1. Limited Liability Company's Name
TLC Ventures LLC
REINSTATEMENT 2003-2004

2. Principal Office Address 12938 SW 26 Street Suite, Apt. #, etc.		3. Mailing Office Address Box 01163157 Suite, Apt. #, etc.	
City & State Miramar, FL		City & State Sioux Falls, SD	
Zip 33027	Country	Zip 57186	Country USA

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4. State/Country of Formation FL	
5. Date Organized or Qualified To Do Business in Florida 8/25/00	
6. FEI Number 65-1035231	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 John H. Copeland III	
Street Address (P.O. Box Number is Not Acceptable) 12938 SW 26 Street	
Suite, Apt. #, Etc.	
City Miramar	State FL
Zip Code 33027	

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 1/9/04

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	John H. Copeland III	12938 SW 26 Street	Miramar, FL 33027

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 1/9/04 Daytime Phone # 305 538 9238

Typed or printed name of signing Managing Member/Manager John H. Copeland III

CR2E041 (10/02)