

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
L00000014091  
FLORIDA DEPARTMENT OF STATE  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 NOV -6 PM 2:07

1. DOCUMENT # L00000014091

Name and Mailing Address

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BORN TO WIN, L.L.C.

8917 NOROAD #2

JACKSONVILLE FL 32210-6117



2. New Mailing Address		4. State/Country of Formation FL	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 11/07/2000	
Principal Place of Business 8917 NOROAD #2 JACKSONVILLE FL 32210	3. New Principal Place of Business Address City, State, Zip	6. FEI Number 59-3675948	Applied For Not Applicable
8. Name and Address of Current Registered Agent SHARBAUGH, RICHARD W 8917 NOROAD #2 JACKSONVILLE FL 32210		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
9. Name and Address of New Registered Agent			
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City		FL	Zip Code
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 Richard W. Sharbaugh		Date 10-20-03	
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
MGRM	MAMSER, JOHN E MGRM	8917 NOROAD # 2	JACKSONVILLE FL 32210
REINSTATEMENT 2003 11/6/03			
200024551682 11/10/03-01014-034 \$50.00			

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

John E. Manser

Date

10/20/03

Daytime Phone #

904-777-1328

Typed or printed name of sign

John E. Manser

Nov. 2, 2003<sup>2 of 2</sup>

To Whom This Concerns,

I did not receive my annual report to be filed. I was told to send this information into you. This I did Oct. 20, 2003. It was sent back to me. I then called and talked with Brenda Tadlock. She said send everything back again with the same check (enclosed).

Thank You,

Richard W. Shabangh

8917 Noroad #2

Jacksonville, FL.

[32210]