

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 DEC 24 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

LOOOOOO14978

DOCUMENT # LOOOOOO14978

1. Limited Liability Company's Name
BIKE AND ROLL MIAMI, LLC

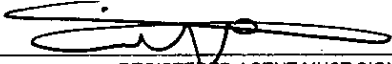
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2. Principal Office Address PO BOX 87490 Suite, Apt. #, etc.		3. Mailing Office Address PO BOX 87490 Suite, Apt. #, etc.		4. State/Country of Formation FL, USA	
City & State CHICAGO, IL		City & State CHICAGO, IL		5. Date Organized or Qualified To Do Business in Florida 12/05/2000	
Zip 60680	Country USA	Zip 60680	Country USA	6. FEI Number 36-4407660	Applied For Not Applicable
				7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent

Name JOSHUA SQUIRE		
Street Address (P.O. Box Number is Not Acceptable) 760 WASHINGTON AVE.		
Suite, Apt. #, Etc.		
City MIAMI BEACH	State FL	Zip Code 33139

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 12/17/2002
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
MGRM-	JOSHUA SQUIRE	PO BOX 87490	CHICAGO, IL 60680

REINSTATEMENT 01-02 GA
CWO

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 12/17/2002 Daytime Phone # 773-251-9757

Typed or printed name of signing Managing Member/Manager JOSHUA SQUIRE, MANAGING MEMBER

CR2E041 (9/01)