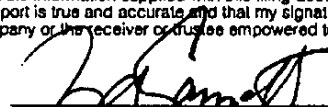


2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

2006 APR -5 AM 9:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
500069556135

DOCUMENT # L00000015867					
1. Entity Name MAJOR LC					
Principal Place of Business STE. 302, EAST BLDG., NO 34/20 CUBA AVE. & 34TH ST., PANAMA 5 REPUBLIC OF PANAMA,			Mailing Address 1220 N. MARKET STREET, SUITE 808 WILMINGTON, DE 19801		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
				5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent FLORIDA FILING & SEARCH SERVICES, INC. 1333 DUVAL STREET TALLAHASSEE, FL 32302				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
DATE _____					
FILE NOW!!! FEE IS \$200.00			Make check payable to Florida Department of State		
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ A
NAME	SATURN INVESTMENT GROUP, S.A.		NAME		
STREET ADDRESS	#302 EAST BLDG. #34/20 CUBA AVE & 34TH		STREET ADDRESS		
CITY - ST - ZIP	PANAMA CITY 5, PANAMA,		CITY - ST - ZIP		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ A
NAME	STAR GROUP FINANCE & HOLDINGS, INC.		NAME		
STREET ADDRESS	#302 EAST BLDG. #34/20 CUBA AVE & 34TH		STREET ADDRESS		
CITY - ST - ZIP	PANAMA CITY 5, PANAMA,		CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ A
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ A
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ A
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ A
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: 			Attorney-In-Fact of Member		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date 4/5/06 302-421-575		

REINSTATEMENT 2005-2006

L00000015867

FLORIDA FILING & SEARCH SERVICES, INC.
P.O. BOX 10662 TALLAHASSEE, FL 32302
1333 N. DUVAL STREET, TALLAHASSEE, FL 32303
PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 04-05-06

NAME: MAJOR, LC

TYPE OF FILING: REINSTATEMENT

BK

COST: \$200

RETURN:

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

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2006 APR -5 AM 9:09
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TALLAHASSEE, FLORIDA

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