

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L01000005022

LIMITED LIABILITY COMPANY
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT -9 AM 10:47

SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **L01000005022**

1. Limited Liability Company's Name

Eagle Realty Holding, L.L.C.

REINSTATEMENT 2003

2. Principal Office Address 701 Brickell Avenue		3. Mailing Office Address 701 Brickell Avenue		4. State/Country of Formation Florida/USA	
Suite, Apt. #, etc. Suite 1250		Suite, Apt. #, etc. Suite 1250		5. Date Organized or Qualified To Do Business in Florida 3/30/2001	
City & State Miami, Florida		City & State Miami, Florida		6. FEI Number 651091876	
Zip 33131	Country USA	Zip 33131	Country USA	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 Robert Brookes	
Street Address (P.O. Box Number is Not Acceptable) 701 Brickell Avenue	
Suite, Apt. #, Etc. Suite 1250	
City Miami	State FL
Zip Code 33131	

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 **X** Robert Brookes Date October 1, 2003

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Types	Name of Managing Members	Street Address of Each Managing Member/Manager	City / State / Zip
Managing Member	Eagle National Holding Company	701 Brickell Ave, Suite 1250	Miami, Florida 33131
REINSTATEMENT 2003			

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 **X** Jaime Gullinski Date 10-1-03 Daytime Phone # 305-358-5300

Typed or printed name of signing Managing Member

Eagle National Holding Company by: Jaime Gullinski, President