

150

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


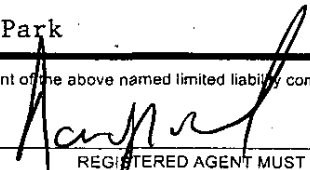
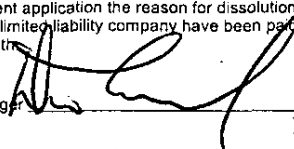
FILED

04 DEC -6 PM 2:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04

RK

<b>LIMITED LIABILITY COMPANY REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> L01000007367			
<b>1. Limited Liability Company's Name</b>  Metrowest Place, L.L.C.			
<b>2. Principal Office Address</b> 1768 Park Center Drive Suite, Apt. #, etc. Suite 380 City & State Orlando, FL Zip 32835 Country USA		<b>3. Mailing Office Address</b> 1768 Park Center Drive Suite, Apt. #, etc. Suite 380 City & State Orlando, FL Zip 32835 Country USA	
<b>4. State/Country of Formation</b> Florida		<b>5. Date Organized or Qualified To Do Business in Florida</b> 05/09/2001	
<b>6. FEI Number</b> 593720903		<b>Applied For</b> Not Applicable	
<b>7. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/>		<b>\$5.00 Additional Fee required for a Certificate of Status</b>	
<b>8. Name and Address of Current Registered Agent</b>			
Name Randolph J. Rush, Esq. Street Address (P.O. Box Number is Not Acceptable) 250 Park Avenue South Suite, Apt. #, Etc. 5th Floor City Winter Park State FL Zip Code 32789			
<b>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.</b> Signature of Registered Agent  Date 12/3/04 REGISTERED AGENT MUST SIGN			
<b>10. Names and Street Addresses of Managing Members/Managers</b>			
Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
mbk	Metrowest Place Development, L.L.C.	1768 Park Center Drive Suite 380	Orlando, FL 32835
400043312334 12/09/04--01071--009 **600.00			
<b>REINSTATEMENT 2004</b>			
<b>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.</b> Signature of Managing Member/Manager  Date 12/3/04 Daytime Phone # David J. Townsend, Manager, Metrowest Place Development, L.L.C. Typed or printed name of signing Managing Member/Manager			

CR2E041 (10/02)