

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L01000007462

AND
FILED

02 NOV 15 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L01000007462

Name and Mailing Address

0003426 01 FP 0.352 **PRSR T1 0 0615 33319-031515
NEWHOPE SERVICES LLC
P.O. BOX 190315
LAUDERHILL FL 33319-0315

800009024218
11/15/02--01066--002 **155.00

REINSTATEMENT



2. New Mailing Address 7675 HAMPTON BLVD. N. LAUDERDALE City, State, Zip NORTH LAUDERDALE FL 33068		4. State/Country of Formation FL																													
3. New Principal Place of Business Address 7675 HAMPTON BLVD City, State, Zip NORTH LAUDERDALE 33068		5. Date Organized or Qualified To Do Business in Florida 05/11/2001																													
6. FEI Number 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 SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134 1840 CORAL WAY, 4TH FL MIAMI, FL 33145		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 <i>[Signature]</i> Date <u>11/12/02</u> REGISTERED AGENT MUST SIGN																															
11. Names and Street Addresses of Each Managing Member/Manager <table border="1"> <thead> <tr> <th>Title(s)</th> <th>Name of Managing Members/Managers</th> <th>Street Address of Each Managing Member/Manager</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGR</td> <td>BENNETT, MARTIN A</td> <td>P.O. BOX 190315 7675 HAMPTON BLVD</td> <td>LAUDERHILL FL 33018 N LAUDERDALE 33068</td> </tr> <tr> <td>VICE OPERATING MGR</td> <td>CHRISTINE FUHLERTON</td> <td>7675 HAMPTON BLVD</td> <td>N LAUDERDALE 33068</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MGR	BENNETT, MARTIN A	P.O. BOX 190315 7675 HAMPTON BLVD	LAUDERHILL FL 33018 N LAUDERDALE 33068	VICE OPERATING MGR	CHRISTINE FUHLERTON	7675 HAMPTON BLVD	N LAUDERDALE 33068																
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip																												
MGR	BENNETT, MARTIN A	P.O. BOX 190315 7675 HAMPTON BLVD	LAUDERHILL FL 33018 N LAUDERDALE 33068																												
VICE OPERATING MGR	CHRISTINE FUHLERTON	7675 HAMPTON BLVD	N LAUDERDALE 33068																												

TB

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

[Signature]

Date 11-12-02 Daytime Phone # 954-718-9442

Typed or printed name of signing Managing Member/Manager