

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

AND
FILED

02 DEC 27 AM 11:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L01000008193

Name and Mailing Address

0009901 01 FP 0.352 **PRSR H5 0 0615 33180-354536

FOUR FISHERMEN, LLC

3610 YACHT CLUB DRIVE
APT. 911

AVENTURA FL 33180-3545

100009716541
12/27/02--01052--004 **150.00



2. New Mailing Address City, State, Zip		4. State/Country of Formation FL	
Principal Place of Business 3610 YACHT CLUB DRIVE APT. 911 AVENTURA FL 33180		5. Date Organized or Qualified To Do Business in Florida 05/23/2001	
3. New Principal Place of Business Address City, State, Zip		6. FEL Number 52-2320039 Applied For Not Applicable	
8. Name and Address of Current Registered Agent LOEB, CURTIS 3610 YACHT CLUB DRIVE APT. 911 AVENTURA FL 33180		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
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 <u>Curt Loeb</u> Date <u>12/12/2002</u> REGISTERED AGENT MUST SIGN			
11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Curt Loeb	3610 Yacht Club drive #911	Aventura, Fla. 33180

REINSTATEMENT 2002

JP-703

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

Curt Loeb

Date

12/12/2002

Daytime Phone #

305-933-1262

Typed or printed name of signing Managing Member/Manager

CURT LOEB