

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED

2011 SEP -1 PM 1:10

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # L01-11121

1. Limited Liability Company's Name

Golden Eagle Investments, LLC

000211542810 08/29/11--01058--001 **1373.75 CR2E041 (1/11)

2. Principal Office Address - No P.O. Box # JACKSON TOWER LAWE OLAS 1905D Suite, Apt. #, etc. LAS 11 City & State Fort Lauderdale, FL Zip 33361 Country USA 3. Mailing Office Address JACKSON TOWER OLAS 1905D Suite, Apt. #, etc. City & State Fort Lauderdale, FL Zip 30078 Country USA

4. State/Country of Formation Florida, USA 5. Date Organized or Qualified To Do Business in Florida 7/10/2001 6. FEI Number 651122335 Applied For Not Applicable 7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent Name Judi Epstein Street Address (P.O. Box Number is Not Acceptable) JACKSON TOWER OLAS 1905D Suite, Apt. #, Etc. LAS 11 City FORT LAUDERDALE State FL Zip Code 33361

E-mail Address: (To be used for future annual report notices)

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 Judi Epstein Date 8/24/11 REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers Table with columns: Titles, Name of Managing Members/Managers, Street Address of Each Managing Member/Manager, City / State / Zip. Entry: MGRM Judi Epstein JACKSON TOWER LAS OLAS 1905D Fort Lauderdale, FL 33361

REINSTATEMENT 03/11 JEP

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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing Member/Manager Judi Epstein Date 8/24/11 Daytime Phone # 404-974-3487 Typed or printed name of signing Managing Member/Manager Judi Epstein, Managing Member