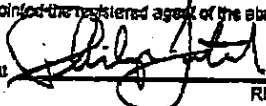


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| LIMITED LIABILITY COMPANY REINSTATEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |  FLORIDA DEPARTMENT OF STATE<br>Jim Smith<br>Secretary of State<br>DIVISION OF CORPORATIONS |                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| DOCUMENT # <b>L01000011715</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 |                                                                                                                                                                              |                           |
| 1. Limited Liability Company's Name<br><b>Tuscany Ridge, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 |                                                                                                                                                                              |                           |
| 2. Principal Office Address<br><b>2933 W SR 434 St 131</b><br><small>Suite, Apt. #, etc.</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 | 3. Mailing Office Address<br><b>2933 W SR 434 St 131</b><br><small>Suite, Apt. #, etc.</small>                                                                               |                           |
| City & State<br><b>Longwood, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 | City & State<br><b>Longwood, FL</b>                                                                                                                                          |                           |
| Zip<br><b>32779</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Country                         | Zip<br><b>32779</b>                                                                                                                                                          | Country                   |
| 4. State/Country of Formation<br><b>Florida</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                                                                                                                                                              |                           |
| 5. Date Organized or Qualified To Do Business in Florida                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 |                                                                                                                                                                              |                           |
| 6. FE Number<br><b>59-3735321</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                       |                           |
| 7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> <small>\$5.00 Additional Fee required for a Certificate of Status</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 |                                                                                                                                                                              |                           |
| 8. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                                                                                                                                                              |                           |
| Name<br><b>Tatch, Philip</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 |                                                                                                                                                                              |                           |
| Street Address (P.O. Box Number is Not Acceptable)<br><b>2933 W SR 434 St 131</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 |                                                                                                                                                                              |                           |
| City<br><b>Longwood</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                                                                                                                                                                              |                           |
| State<br><b>FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                                                                                                                                                              |                           |
| Zip Code<br><b>32779</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.<br>Signature of Registered Agent  Date <b>11/4/02</b><br>REGISTERED AGENT MUST SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 |                                                                                                                                                                              |                           |
| 10. Names and Street Addresses of Managing Members/Managers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                 |                                                                                                                                                                              |                           |
| Title                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Name of Managing Member/Manager | Street Address of Each Managing Member/Manager                                                                                                                               | City/State/Zip            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Joseph Kantor MGRM</b>       | <b>2933 W SR 434 St 131</b>                                                                                                                                                  | <b>Longwood FL 32779</b>  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Moshe Ziv MGRM</b>           | <b>144 W 77th St</b>                                                                                                                                                         | <b>New York, NY 10023</b> |
| 10/29/02---01179---002---\$50.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 |                                                                                                                                                                              |                           |
| 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.<br>Signature of Managing Member/Manager  Date <b>11/4/02</b> Daytime Phone# <b>407/682-6940</b><br>Typed or printed name of signing Managing Member/Manager <b>Joseph Kantor</b> |                                 |                                                                                                                                                                              |                           |

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA