

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 DIVISION OF CORPORATIONS
 201000012379

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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

0012808 01 AT 0.292 **AUTO T6 0 0615 33480-452212
 812 INVESTORS L.L.C.
 412 BRAZILIAN AVENUE
 PALM BEACH FL 33480-4522



2. New Mailing Address 230 ROYAL PALM WAY Ste 401		4. State/Country of Formation FL	
City, State, Zip PALM BEACH FL 33480		5. Date Organized or Qualified To Do Business in Florida 07/26/2001	
Principal Place of Business 412 BRAZILIAN AVENUE PALM BEACH FL 33480	3. New Principal Place of Business Address 230 ROYAL PALM WAY #401	6. FEI Number 14-1839679	Applied For Not Applicable
City, State, Zip PALM BEACH FL 33480		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 KEDTEL, FREDERICK J III 412 BRAZILIAN AVENUE PALM BEACH FL 33480	9. Name and Address of New Registered Agent Name Current Address (P.O. Box Number is Not Acceptable) 230 ROYAL PALM WAY Suite 401 City PALM BEACH FL 33480
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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 Frederick J. Keitel III **REQUIRED** Date 11/4/03
 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	KEITEL III, FREDERICK J	412 BRAZILIAN AVENUE	PALM BEACH FL 33480
		700024637957 11/13/03--01047--001 **155.00	
REINSTATEMENT			
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 Frederick J. Keitel III Date 11/13/03 Daytime Phone (917) 881 1496
 Typed or printed name of signing Managing Member/Manager FREDERICK J. KEITEL III

CR2E094 (7/03)