

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
FLORIDA DEPARTMENT OF STATE  
Glenn R. Hord  
Secretary of State  
DIVISION OF CORPORATIONS

1. DOCUMENT # L01000013993

Name and Mailing Address

0003730 01 AT 0.292 \*\*AUTO T6 0 0615 32819-331018



MY DAUGHTER'S WEDDING, LLC  
5018 DR. PHILLIPS BLVD.  
ORLANDO FL 32819-3310

04 FEB -2 PM 12:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. New Mailing Address 5012 Dr. Phillips Blvd. Orlando, FL 328		4. State/Country of Formation FL	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 08/16/2001	
Principal Place of Business 5018 DR. PHILLIPS BLVD. ORLANDO FL 32819	3. New Principal Place of Business Address 5012 Dr. Phillips Blvd. Orlando, FL 32819	6. FEI Number 59-3737956	Applied For Not Applicable
		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	\$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent HARRIS, MARLO R 265 SNOW FIELD RUN HEATHROW FL 32746	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 Marlo R. Harris **REGISTERED AGENT MUST SIGN** Date 10/29/03

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
MGR	HARRIS, MARLO R	265 SNOW FIELD RUN <i>Changed</i>	HEATHROW FL 32746
MGR	HARRIS, ROBERT L	265 SNOW FIELD RUN	HEATHROW FL 32746
300028013523 02/02/04--01060--006 **200.00			
<b>REINSTATEMENT</b> 2003-2004 M THOMAS			

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 Marlo R. Harris **REGISTERED AGENT MUST SIGN** Date 10/29/03 Daytime Phone # 407-352-6648

Typed or printed name of signing Managing Member/Manager MARLO R. HARRIS