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L01000015011

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PLEASE READ INSTRUCTIONS BEFORE FILING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L01000015011

1. Limited Liability Company's Name
SHELL ROAD PROPERTY INVESTORS, LLC

2. Principal Office Address
1225 Fruitville Road

3. Mailing Office Address
1225 Fruitville Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. State/Country of Formation
Florida

5. Date Organized or Qualified To Do Business in Florida
03/31/2001

City & State
Sarasota, FL

City & State
Sarasota, FL

6. FEI Number
65-1147574

Applied For
 Not Applicable

Zip
34236

Country
USA

Zip
34236

Country
USA

7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name
GATES, Chad L.

Street Address (P.O. Box Number is Not Acceptable)
1680 Fruitville Road

Suite, Apt. #, Etc.
Suite 102

City
Sarasota

State
FL

Zip Code
34236

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

Date
6/19/03

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

| Titles | Name of Managing Members/Managers | Street Address of Each Managing Member/Manager | City / State / Zip |
|--------|-----------------------------------|--|--------------------|
| Mgr | MILLER, Mark S. | 1225 Fruitville Road | Sarasota, FL 34236 |
| Mgr | CONTI, Terence A. | 1225 Fruitville Road | Sarasota, FL 34236 |
| | | | |
| | | | |
| | | | |

REINSTATEMENT 02-03
Handwritten initials/signature

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.

Signature of Managing Member/Manager

Date
6/19/03

Daytime Phone # **941/366-9936**

Typed or printed name of signing Managing Member/Manager

Mark S. Miller, Manager

CS2E041 (10/02)

Jun 19 03 02:50p

levin/tannenbaum/wolff

(941) 366-8491

242
P.1

Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : LEVIN AND TANNENBAUM, P.A.
Account Number : I19980000105
Phone : (941)316-0111
Fax Number : (941)366-8491

LIMITED LIABILITY REINSTATEMENT

SHELL ROAD PROPERTY INVESTORS, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
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