PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR 2002 VBR



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L01000020097

Name and Mailing Address

FILED

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SEGRETARY OF STATE
TABLESHASSEE FLORIDA

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Daytime Phone #

Principal Place of Business 150 S.E. 2ND AVE. SUITE 500 MIAMI FL 33131 City, State, Zip 7.	11/20/2001 Applied For Not Applicable O Additional Fee required r a Certificate of Status Agent Zip Code
Principal Place of Business 150 S.E. 2ND AVE. SUITE 500 MIAMI FL 33131 City, State, Zip 7. CERTIFICATE OF STATUS DESIRED 8. Name and Address of Current Registered Agent Name SILVER & SILVER 150-3.E. 2ND AVE. SUITE 500 MIAMI FL 9313T 33 / 350 City Street Address (P.O. Box Number is Not Acceptable) City FL 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 REGISTERED AGENT MUST SIGN 11. Names and Street Addresses of Each Managing Member/Manager Title(s) Name of Managing Member/Manager	Applied For Not Applicable O Additional Fee required ra Certificate of Status Agent
150 S.E. 2ND AVE. SUITE 500 MIAMI FL 33131 City, State, Zip 7. CERTIFICATE OF STATUS DESIRED 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent SILVER & SILVER 150-S.E. 2ND AVE. SUITE 500 MIAMI FL-9513T 33 130 City FL City FL 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 REGISTERED AGENT MUST SIGN 11. Names and Street Addresses of Each Managing Member/Manager Title(s) Name of Managing Member/Manager	Not Applicable O Additional Fee required ra Certificate of Status Agent
8. Name and Address of Current Registered Agent 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name SILVER & SILVER 150-3.2. 2ND AVE. SUITE 500 / 08 5. (N) A M / SVI 5 MIAMI FL-9313T 33 / 35 City FL 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 REGISTERED AGENT MUST SIGN 11. Names and Street Addresses of Each Managing Member/Manager Title(s) Name of Managing Member/Manager Name of Managing Member/Manager Name of Managing Member/Manager Name of Managing Member/Manager 150-8: 2. 2ND AVE. SUITE-500 MIAMI FL 9373T 150-8: 2. 2ND AVE. SUITE-500 MIAMI FL 9373T - 33133	r a Certificate of Status Agent
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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 fur filling this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 6 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	

Max R. Silver, Authorized Representative

Typed or printed name of signing Managing Member/Manager

Signature of

Managing Member/Manager

MAX R. SILVER

108 S. MIAMI AVENUE,2^{NO} FLOOR MIAMI, FLORIDA 33130

TELEPHONE (305) 374-4788
TELECOPIER (305) 358-6535
E-MAIL: SILVER-SILVER@MSN.COM

October 28, 2002

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Buck Kohr

Re: Redhorn Aviation, LLC

Bota, L.L.C.

Dear Mr. Kohr:

As per our telephone conversation concerning the payment of the reporting fees for Redhorn Aviation, L.L.C. and Bota, L.L.C., for the year of 2002 the original reporting notices for said companies were never received by our office.

I am enclosing herewith our check of \$50.00 for Bota, L.L.C. which together with the payment of \$50.00 mailed to your office on October 23, 2002, represents payment of the reporting fees due for these two companies.

Thank you for your assistance.

Cordially,

SILVER & SILV

Max R. Silver

MRS/mdc

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