FILED
Aug 31, 2005 8:00 A.M.
Secretary of State

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLE

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 AUG 31 AM 11:05
SECRETARY OF STATE
CORPORATIONS

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08/31/05--01044--001 **255.00

DOCUMENT # L 01000020709

1. Limited Liability Company's Name
M. S. PATEL & COMPANY USA, LLC.

2. Principal Office Address		3. Mailing Office Address	
M.S.PATEL & CO USA, LLC		M.S.PATEL & CO USA, LLC	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
5815 WATERS AVENUE		5815 WATERS AVENUE	
City & State		City & State	
SAVANNAH GEORGIA		SAVANNAH, GEORGIA	
Zip 31404	Country U.S.A.	Zip 31404	Country U.S.A.

4. State/Country of Formation FLORIDA, U.S.A.

5. Date Organized or Qualified To Do Business in Florida DECEMBER 31, 2001

6. FEI Number 75-2973583 Applied For ☐ Not Applicable ☐

7. CERTIFICATE OF STATUS DESIRED [redacted]

8. Name and Address of Current Registered Agent

Name: KASHMIRA. I. BHAVSAR

Street Address (P.O. Box Number is Not Acceptable): 1053 MAITLAND CENTER COMMONS 2nd FLOOR

Suite, Apt. #, Etc.: 1053 MAITLAND CENTER COMMONS 2nd FLOOR

City: MAITLAND State: FL Zip Code: 32751

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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: [signature] Date: 8/26/05
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	MR. HETNESH. S. PATEL.	14 PAULING ROAD, SUBURBS P.O.BOX 374	BULAWAYO, ZIMBABWE
MGRM	MR. JAYESH. S. PATEL.	14 PAULING ROAD, SUBURBS P.O.BOX 374	BULAWAYO, ZIMBABWE
MGRM	MR. SUMANT. M. PATEL.	14 PAULING ROAD, SUBURBS P.O.BOX 374	BULAWAYO, ZIMBABWE
MGRM	MS ANEETA. PATEL	5815 WATERS AVENUE	SAVANNAH, GA 31404
		REINSTATEMENT	03-05

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 608.408, 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: A.D Patel A.D Patel Date: 8/26/2005 Daytime Phone #: 912 354 8459

Typed or printed name of signing Managing Member/Manager: ANEETA. PATEL

FROM : B FAX NO. : Aug. 26 2005 03:12PM P1