

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

2004 JAN -6 PM 3: 59

**DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**

1. DOCUMENT # L01000021771

Name and Mailing Address

0012513 01 AT 0,292 **AUTO T6 0 0615 33446-245646



MQ INTERIORS, LLC
16046 RIO DEL SOL
DELRAY BEACH FL 33446-2456

500026061485
01/06/04--01007--029 **150.00



2. New Mailing Address		4. State/Country of Formation FL	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 12/17/2001	
Principal Place of Business 16046 RIO DEL SOL DELRAY BEACH FL 33446	3. New Principal Place of Business Address City, State, Zip	6. FEI Number	Applied For Not Applicable
8. Name and Address of Current Registered Agent QUEEN, MARISSA 16046 RIO DEL SOL DELRAY BEACH FL 33446		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		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 <u><i>Marissa Queen</i></u> REGISTERED AGENT MUST SIGN Date <u>12/19/03</u>	
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	QUEEN, MARISSA F	16046 RIO DEL SOL	DELRAY BEACH FL 33446
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.		<div style="text-align: center; font-size: 2em; font-weight: bold;">REINSTATEMENT</div> <div style="text-align: right; font-size: 1.5em; font-weight: bold;">2003</div>	
Signature of Managing Member/Manager <u><i>Marissa Queen</i></u>		Date <u>12/19/03</u> anytime Phone <u>813-218-2000</u>	
Typed or printed name of signing Managing Member/Manager			

CR2E034 (7/03)