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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 02L000000051 1. Limited Liability Company's Name <u>LO2 000000051</u> Quality Wireline Equipment LC			
2. Principal Office Address - No P.O. Box # 400 Coral Way Suite, Apt. #, etc.		3. Mailing Office Address 400 Coral Way Suite, Apt. #, etc.	
City & State Fort Lauderdale, FL		City & State Fort Lauderdale	
Zip 33301	Country	Zip 33301	Country
4. State/Country of Formation		5. Date Organized or Qualified To Do Business in Florida 12/26/01	
6. FEI Number 60-0000799		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 Name Jack Rettig Street Address (P.O. Box Number is Not Acceptable) 400 Coral Way Suite, Apt. #, Etc. City Fort Lauderdale			
		State FL	Zip Code 33301
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 July 31/2007 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
member	Jack Rettig	400 Coral Way Ft. Lauderdale FL 33301	
REINSTATEMENT			
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 July 31, 2007	Daytime Phone # 337-837-1772
Typed or printed name of signing Managing Member/Manager Jack Rettig			