

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02000004077

1. Limited Liability Company's Name
RJ DESIGNS LLC

2. Principal Office Address
144 NW 105TH ST

Suite, Apt. #, etc.

City & State
MIAMI, FLA.

Zip
33150

Country

3. Mailing Office Address
144 NW 105TH ST

Suite, Apt. #, etc.

City & State
MIAMI, FLA.

Zip
33150

Country

4. State/Country of Formation
FLORIDA

5. Date Organized or Qualified To Do Business in Florida
2/20/2002

6. FEI Number
01-0621521

Applied For
Not Applicable

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

CR2E041 (8/05)

FILED
05 NOV 22 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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8. Name and Address of Current Registered Agent

Name
TERESITA JETTER

Street Address (P.O. Box Number is Not Acceptable)
144 NW 105TH ST

Suite, Apt. #, Etc.

City
MIAMI

State
FL

Zip Code
33150

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 *Teresita Jetter*
REGISTERED AGENT MUST SIGN

Date **11/15/2005**

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	ROMAN JETTER	144 NW 105TH ST	MIAMI, FLA. 33150
MGR	TERESITA JETTER	144 NW 105TH ST	MIAMI, FLA. 33150
			000061962080 12/08/2005--01050--002 **250.00
			REINSTATEMENT 2003-2005

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 *Teresita Jetter* Date **11/15/2005** Daytime Phone# **786-2109405**

Typed or printed name of signing Managing Member/Manager **TERESITA JETTER**