



2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L02000007356 1. Entity Name MARIZHEIL ENTERPRISES, LLC						<div style="border: 1px solid black; padding: 5px; transform: rotate(-10deg);"> FILED SECRETARY OF STATE DIVISION OF CORPORATE REFORMS 05 DEC 30 AM 9:48 </div>	
Principal Place of Business 702 E BRANDON BLVD. BRANDON, FL 33511				Mailing Address P.O. BOX 2370 BRANDON, FL 33509-2370			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country					
4. FEI Number 75-3032883				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent DUBOSE, MARIE B 7224 QUAIL HOLLOW BOULEVARD WESLY CHAPEL, FL 33544				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$200.00				Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GALVEZ, MA AUXILIADORA S 702 EAST BRANDON BOULEVARD BRANDON, FL 33511 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center; font-size: 1.2em;"> 500063963735 01/18/06--01047--006 **150.00 </div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GALVEZ, ZHEILA M 702 EAST BRANDON BOULEVARD BRANDON, FL 33511 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GALVEZ, LOURD BENNETT M 702 EAST BRANDON BOULEVARD BRANDON, FL 33511 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center; font-size: 1.2em;"> REINSTATEMENT 2005 </div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.							
SIGNATURE: Maria Auxiliadora Galvez				Dec. 28, 2005 (813) 684-6771			