PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L03000079926

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 NOV 20 PM 3:25

DOCUMENT # L03000079926

1. Limited Liability Company's Name
CORPORATE LAW COUNSELORS, P.L.

2. Principal Office Address	3. Mailing Office Address
751 Essex Place	751 Essex Place
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando, FL	City & State: Orlando, FL
Zip: 32803 Country: USA	Zip: 32803 Country: USA

4. State/Country of Formation: Florida

5. Date Organized or Qualified To Do Business in Florida: April 1, 2002

6. FEI Number: 030419992 ☐ Applied For ☐ Not Applicable

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

8. Name and Address of Current Registered Agent

Name: Cope C. Thomas

Street Address (P.O. Box Number is Not Acceptable): 751 Essex Place

700024878287
11/20/03--01030--001 **50.00

Suite, Apt. #, Etc.:

City: Orlando State: FL Zip Code: 32803

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: Cope C. Thomas Date: 11/17/03

REGISTERED AGENT MUST SIGN

CR2E041 (04/02)

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
MGRM	Cope C. Thomas	751 Essex Place	Orlando, Florida 32803
MGRM	Bassel J. Maali	5182 Isleworth Country Club Drive	Windermere, Florida 34786

File 1st REINSTATEMENT 2003 Cut

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: [signature] Date: 11/17/03 Daytime Phone #: 407-341-6446

Typed or printed name of signing Managing Member/Manager: Bassel J. Maali