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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
L02000008039

APPROVED
AND
FILED

03 NOV 24 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L02000008039

Name and Mailing Address

0007185 01 AT 0.292 **AUTO T7 0 0615 33168-412064



MAKE IT HAPPEN L.L.C.

564 N.W. 146TH ST

MIAMI FL 33168-4120



2. New Mailing Address		4. State/Country of Formation FL	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 04/03/2002	
Principal Place of Business 564 N.W. 146TH ST MIAMI FL 33168	3. New Principal Place of Business Address City, State, Zip	6. FEI Number 27-0016186	Applied For Not Applicable
8. Name and Address of Current Registered Agent ELIE, STEVE 564 N.W. 146TH ST MIAMI FL 33168		9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is optional) 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 <i>[Signature]</i> SUBMIT REQUIRED Date 10-17-03 REGISTERED AGENT MUST SIGN			
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
MEMBER	Steve Elie	564 N.W. 146th Street	Miami, FL 33168
600024001866 10/22/03--01013--025 **155.00			
<i>[Signature]</i>			
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. Signature of Managing Member/Manager <i>[Signature]</i> SUBMIT REQUIRED Date 10-17-03 Daytime Phone # (786) 306-1664 Typed or printed name of signing Managing Member/Manager Steve Elie			

CR2E084 (7/03)