

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 NOV 10 PM 4:05

1. DOCUMENT # L02000011839

Name and Mailing Address

0012532 01 AT 0.292 \*\*AUTO T6 0 0615 33455-611575



PRIMATEWEB,LLC  
7375 S.E. CRAIG STREET  
HOBE SOUND FL 33455-6115

600024546966  
11/10/03--01011--004 \*\*300.00



US

2. New Mailing Address <b>8949 SE BRIDGE ROAD, STE #315</b> City, State, Zip <b>HOBE SOUND, FL 33455</b>		4. State/Country of Formation FL	
Principal Place of Business 7375 S.E. CRAIG STREET HOBE SOUND FL 33455 US		5. Date Organized or Qualified To Do Business in Florida 05/15/2002	
3. New Principal Place of Business Address N/A City, State, Zip N/A		6. FEI Number 04-3663364 Applied For Not Applicable	
8. Name and Address of Current Registered Agent DONALD L. BROOKS, P.A. 1201 U.S. HIGHWAY ONE SUITE 415 NORTH PALM BEACH FL 33408		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
9. Name and Address of New Registered Agent Name MARK GROSSMAN W/ BECKER & POLAKOFF Street Address (P.O. Box Number is Not Acceptable) 5201 BLUE LAGOON DR. STE 100 SUITE 100 City MIAMI FL 33125			
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 <b>SIGNATURE OF REGISTERED AGENT</b> Date _____ 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
MGRM	ANDRASSY, JAY W	7375 S.E. CRAIG STREET	HOBE SOUND FL 33455

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

Date 11-3-03

Daytime Phone # 772/545-3918

Typed or printed name of signing Managing Member/Manager

REINSTATEMENT 03 dec

OCT. 25, 2003 10:23AM BECKER & POLIAKOFF  
FROM : FAX NO. : 7725467802

NO. 274 F. 343  
Oct. 26 2003 12:45PM P3

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PRIMATEWEB LLC  
7375 S.E. CRAIG STREET  
HOBE SOUND FL 33455-8115



US

~~8949~~ SE BRIDGE ROAD, STE #315  
HOBE SOUND, FL 33455

7375 S.E. CRAIG STREET  
HOBE SOUND FL 33455  
US

N/A  
N/A

04-3663364

05/15/2002

DONALD L. BROOKS, P.A.  
1201 U.S. HIGHWAY ONE  
SUITE 415  
NORTH PALM BEACH FL 33408

MARK GROSSMAN W/ BECKER & POLIAKOFF  
5201 BLUE LAGOON DR  
SUITE 100  
MIAMI

83125

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

NGRM ANDRAGBY JAY W

7375 S.E. CRAIG STREET

HOBE SOUND FL 33455

2Ach  
409014  
6144

Signature of  
Managing Member/Manager