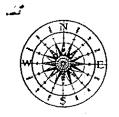
## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT	Secreta	RTMENT OF STATE ary of State	<u> </u>	FILED R 22 AM 7: 42	
The state of the s	DIVISION OF CORPORATIONS				
DOCUMENT # L 0200013680  1. Limited Liability Company's Name			TALLA	IT YOF STATE NASSLE FLONIDA	
Sassy lady, LLC					MJH
, , , , , , , , , , , , , , , , , , , ,			800035807458 05/10/0401046014 **50,QQ		
2. Principal Office Address 3. Mailing Office Address			1	U/U4U1U46U14 )	**50,00 GC }
25 Hendricks Isle Suite, Apt. #, etc.	% Cindy Gardere, Accountant		4. State/Cou	ntry of Formation	, 00
504 N City & State	Suite, Apt. #, etc. 4911 Hawk Trail City & State		USA  5. Date Organized or Qualified To Do Business in Florida  6 4 2002		
+. Landerdale, FL Marietta, GA		, 6A	6. FEI Numb	er	Applied For
33301 USA	30066	Country	7.	0552801 E OF STATUS DESIRED 55.00 Add	Not Applicable ditional Fee required
		Address of Current Register		for a Ce	ertificate of Status
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  City  Th. Lauderdale  State  State  Tip Code  FL 33301					
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 Date 4-15-04					
10. Names and Street Addresses of Managing Memb	pers/Managers				
Titles Name of Managing Members/ Manager	s	Street Address of Each Managing Member/Manager		City / State / Zip	
16R Robert Steven Bostic 25 Hendricks Isle #			504 N	F1. Landerdale 1	3330/
				14-toucevalle	C 25201
				2003-	
DENSTITEMENT 2004					
Wo Ramoth Lean					
				00	
11 of 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 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					
Signature of Manager Omtice Date 4-15-04 Daytime Phone#					
Typed or printed name of signing Managing Member/Manager Steve Bostic					



STEVE BOSTIC April 15, 2004

> Divison of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

MJH ;

Re:

Sassy Lady, LLC

Document # L02000013680

FEI 820552801

Dear Sir/Madam:

Enclosed please find a completed LLC Reinstatement form for Sassy Lady, LLC. I have just discovered that this LLC was administratively dissolved because our 2003 Annual Report did not include the FEI number. However, we never received the rejection letter advising us of this and, therefore, assumed our Annual Report was filed. I have noted the correct mailing address for this LLC to avoid further problems.

As we enclosed a check covering the \$50.00 fee with last years report and I've confirmed that you have that recorded in your records, I am enclosing a \$50.00 check to cover the fee for the 2004 Annual Report.

If you need anything further, please advise me by contacting me via mail at 4911 Hawk Trail, Marietta, GA 30066. Thank you.

Sincerely,

Steve Bostic

ELECTRA INTERNATIONAL, INC.

25 HENDRICKS ISLE FT. LAUDERDALE. FLORIDA 33301 .954.895.9119 rsbostic@earthlink.net