PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIA COMPA REINSTATE	NY	s	DEPARTMENT OF STATE SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF CORPORATIONS		ų ·	9 PH 2:45		
DOCUMENT # 1. Limited Liability Company's Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Cleo & co, LLC					. PA (17 %			
					600037760636 08/08/0401027004 **50.00			
2. Principal Office Ad		ffice Address	C colonal State/Cour	try of Forn	nation			
13280 Alhambra Lake 13290 Suite. Apt. #. etc. Circle Suite. Apt. #) Alhambra Lake	Circlife. Stateroom	ury or r on			
	ChefC			5. Date Organized or Qualified To Do Business in Florida July 2002				
City & State	erelo El	City & State			6. FEI Number X Applied For			
Delvay Beach, FL		Delray beach, FC			1-0415601 Not Applicable			
^{zip} 33446	USA	334	146 USA	CERTIFICATE	OF STATL		inal Fee required licate of Status	
8. Name and Address of Current Registered Agent								
Name Raquel Alter								
Street Address (P.O. Box Number is Not Acceptable)								
Suite.	13280 Albambra Lake Circle Suite. Apt. #, Etc.							
					Ctato	Zip Code	_	
Delray Beach					State FL	33446		
9. I, being appointed the registered agent of the above named timited liability company, am familiar with and accept the obligations of Chapter 608, F.S.								
Signature of Registered Agent Date May 16, 2004								
REGISTERED AGENT MUST SIGN								
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 R	oquel Alter		13280 Alhambra	Lake Circle	Del	ray Beach, FL	33447	
WPBM N	icholas-Alter		1.3280 Alhambra	Lake-Circle	Delr	ay beach, FE	33447	
					02/	17/03 90011	047	
						#5	000	
11. I certify that I am managing member/manager or the receiver or trustee empowered process that the initial control of the requirement 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 May 26, 200 Baytime Phone # 214-680-7244								
Typed or printed name of signing Managing Member/Manager Roquel Alter								

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

May 26, 2004

To Whom It May Concern:

Attached is a Reinstatement Form that includes changes of address of Cleo & Co, as well as change of Registered Agent (and its address).

I have also included a check for \$50.00, which includes registration for the year 2004, and should make the company active. I have not included an amount of an additional \$100.00 for reinstatement because this should not apply to this company because our records show that a check was sent to you for the year 2003. This check was dated February 7, 2003, and is number 371 from Chase Manhattan Bank. I also have proof that it was deposited. With this, our company should not have been considered inactive, and thus we should not be charged for reinstatement.

Furthermore, I was told by one of your representatives that you had sent Cleo & Co some information that the form we originally sent to you was rejected, but we never received any such mailing. If so, we would have taken care of providing that information right away.

I would appreciate if this could be clarified as soon as possible. If you have any questions, please feel free to contact me at (214) 680-7244, or write me at:

13280 Alhambra Lake Circle Delray Beach, FL 33446

Ryon.

Kind regards,

Raquel Alter