PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. LIMITED LIABILITY FLORIDA DEPARTMENT OF STATE **COMPANY** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS FILED DOCUMENT #L02000017693 2004 MAR 25 P 3: 32 1. Limited Liability Company's Name SECRETARY OF STATE TALLAHASSEE, FLORIDA D.G.T. COLORADO PROPERTIES, LLC 3. Mailing Office Address 2. Principal Office Address 1169 SW Dyer Point Road 1169 SW Dyer Point Road 4. State/Country of Formation Florida/USA Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Date Organized or Qualified To Do Business in Florida July 15, 2002 City & State City & State 6. FEI Number Palm City, FL Palm City, FL Zip Country Zip Country 7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required 34990 USA for a Certificate of Status 34990 USA 8. Name and Address of Current Registered Agent Robert S. Kramer Street Address (P.O. Box Number is Not Acceptable) 853 SE Monterey Commons Blvd. Suite, Apt. #, Etc. City Zip Code State FL Stuart 34996 9. I, being appointed the regis et ages of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Applied For

X Not Applicable

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	Katherine F. Thompson	1169 SW Dyer Point Road	Palm City, FL 34990
			0031091988 /0401003010 **205.00
			210 LO EO 112

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. 03/17/2004 Daytime Phone # (772) 220-9230 Managing Member/Manager

Typed or printed name of signing Managing Member/Manager _

Katherine F. Thompson