

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT 23 PM 3: 19

Name and Mailing Address

0013102 01 AT 0.292 **AUTO T7 0 0615 33496-164125

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DEBFIT, L.L.C.

5125 SUFFOLK DRIVE

BOCA RATON FL 33496-1641

[illegible]

CR2E034 (7/03)

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/Manage

Date 10/17/03 Daytime Phone # 561-994-9859

Typed or printed name of signing Managing Member/Manager