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 -7 PM 1: 18

1. DOCUMENT # L02000019612

Name and Mailing Address

.,

Registered Agent

0013270 01 AT 0.292 **AUTO T8 2 0615 34984-431011 JMF PROPERTIES LC 111 SW CHAPMAN AVENUE PORT ST LUCIE FL 34984-4310

2. New Mailing Address			State/Country of Formation FL	
City, State, Zip			Date Organized or Qualified To Do Business in Florida	08/01/2002
Principal Place of Business 111 SW CHAPMAN AVENUE PORT ST LUCIE FL 34984	New Principal Place of Business Address City, State, Zip		6. FEI Number 45-0493174 7. CERTIFICATE OF STATUS DESIRED	Applied For Not Applicable \$5.00 Additional Fee required for a Certificate of Status
8. Name and Address of Curre		SARAH L. FIMIAN		
38 2 SE EVANS AVE NUE PO RT ST LUCIE FL 34984		Street Address (P.O. Box Number is Not Acceptable) 11 5 W CHAPMAN Hue		
		city Pok	et st Lucie	FL Zip Code 34984

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				
MGM R	JOHN MIFIMIAN.	111 5W CHADMAN Ave	PORTS+ LUCIE, FL 34984				
		·					
		80 11/07/	0024511048 0301061012 **155.00				
			[] -03 cus				
			O(C)				

12. I certify that I am managing member/manager or the receiver or trustee provided 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 iminated. Ite 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 included on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Date 11/2/03 Daytime Phone # 343 - 7462

Date ____/1/2/03