## DAGOOOS SERE ON GGOS FORD

COMPANY REINSTATEMENT  COMPANY  BEINSTATEMENT  FLORIDA DEPARTMENT OF STATE  Secretary of State  DIVISION OF CORPORATIONS					03 DEC -9 PM 2: 22				
DOCUMENT # L02000024665  1. Limited Liability Company's Name  Rolls Royce Investment LLC						(.OF STATE EFFEORIDA			
	Office Address		Mailing Office Address 160 West Comine Real'					_	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State/Country of Formation Florida					
C <del>-5 #308</del> _		# 225		5. Date Organized or Qualified To Do Business in Florida 9/23/02				7	
City & State Boca F	Raton, FL	Roca-Raton, FL		6. FEI Numbe		5654	Applied For		
zip -33487	Country USA	zip 33486	Country US 17	7.	<u> </u>	S DESIRED S5.00 Ad	Iditional Fee requirertificate of Status	red	
8. Name and Address of Current Registered Agent									
Name Kirschen Tarek									
	Street Address (P.O. Box Number is Not Acceptable) 7494 N. Federal Highway				Wesi	+ Camino Re	106		
	Suite, Apt. #, Etc. C=5, #308				# 225				
	City Boca Raton				State FL	Zip Code 33487 3348	196		
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and a Signature of Registered Agent REGISTERED AGENT MUST SIGN					accept the obligations of Chapter 608, F.S.  Date				
<b>10.</b> Name:	s and Street Addresses of Managing Men					]			
Titles	Name of Managing Members/Managers		Street Address of Each Managing Member/Manager		City / State / Zip				
Haem	Tarek-Kirschen 160 West Camin			Real-	Bo	ca Rator	FL 3348	E	
				1270 1270	) (10) <del>) (13)</del>	253391 <del>0006 006</del>	70 **!50.00	-	
			REMST	ATEN	EN	T 2002	3		
filing thi all fees	r that I am managing member/manager o is reinstatement application the reason for owed by the limited liability company have ade under oath.	r the receiver or trustee em dissolution has been elimin been paid. The information	npowered to execute this appli nated, the limited liability compa n indicated on this application i	cation as provided any name satisfies is true and accurat	d for in ch the requi te, and my	apter 608, F.S. I further rements of section 608.4 signature shall have the	certify that when 06, F.S., and that same legal effect		

Typed or printed name of signing Managing Member/Manager \_

Tarek Kirschan Daytime Phone # 561-929-8000