

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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FILED

2004 DEC 27 PM 3:34

SECRETARY OF STATE
12/27/04 12:00 PM 12/27/04 12:00 PM

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DOCUMENT # L 02000026687			
1. Limited Liability Company's Name FLYbridge Air LLC			
2. Principal Office Address 6117 NW 19 ST Suite, Apt. #, etc.		3. Mailing Office Address SAME Suite, Apt. #, etc.	
City & State Margate FL		City & State	
Zip 33063	Country Brownail	Zip	Country

4. State/Country of Formation	
5. Date Organized or Qualified To Do Business in Florida 10/09/02	
6. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent		
Name Roger Cepelik		
Street Address (P.O. Box Number is Not Acceptable) 6117 NW 19 ST		
Suite, Apt. #, Etc.		
City Margate Fla	State FL	Zip Code 33063

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.	
Signature of Registered Agent Roger Cepelik	Date
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
MR	Roger Cepelik	6117 NW 19 ST	Margate, FL 33063

REINSTATEMENT 03-04

11. 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/Manager Roger Cepelik	Date 12/21/04 Daytime Phone # 561-305-1186
Typed or printed name of signing Managing Member/Manager	

CR2E041 (10/02)