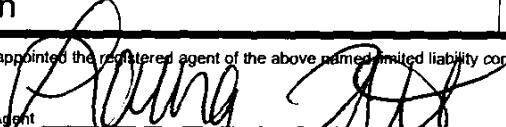
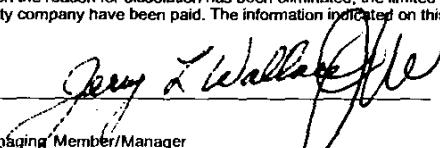
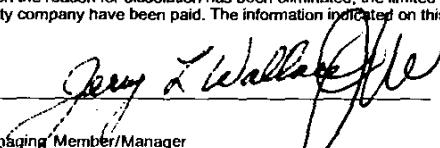


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L0200027217			
1. Limited Liability Company's Name Jerry Wallace Dealmakers Realty , L.L.C.			
2. Principal Office Address - No P.O. Box # 151 Regions Way		3. Mailing Office Address Suite, Apt. #, etc. 6A	
City & State Destin, FL		City & State	
Zip 32541	Country Okaloosa	Zip	Country
B. Name and Address of Current Registered Agent			
Name Laura Zetterlund			
Street Address (P.O. Box Number is Not Acceptable) 151 Regions Way			
Suite, Apt. #, Etc.			
City Destin	State FL	Zip Code 32541	
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 	Date 10/12/07		
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
MGR	Jerry Wallace	4458 Ocean View Drive	Destin, FL 32541
REINSTATEMENT 2005-2007			
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 		Date 10/12/07	Daytime Phone # 850 837 0422
Typed or printed name of signing Managing Member/Manager 			

FILED

07 OCT 18 PM 4:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E041 (1/07)

4. State/Country of Formation

FL

**5. Date Organized or Qualified
To Do Business in Florida**

10/2003

6. FEI Number

13-4217235

Applied For

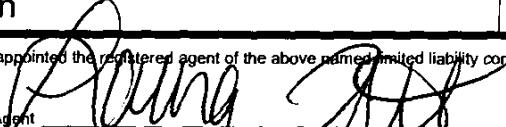
Not Applicable

7.

CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required
for a Certificate of Status

A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.

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.

Date


10/12/07

**400110939744
10/18/07-01004--016 **150.00**