


L02000028626

81-55.00

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

<b>LIMITED LIABILITY COMPANY REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> L02000028626			
<b>1. Limited Liability Company's Name</b> Morning Star Management, LLC			
<b>2. Principal Office Address</b> 1605 Main Street		<b>3. Mailing Office Address</b>	
Suite, Apt. #, etc. Suite 912		Suite, Apt. #, etc.	
City & State Sarasota, FL		City & State	
Zip 34236	Country USA	Zip	Country
<b>4. State/Country of Formation</b> Sarasota		<b>5. Date Organized or Qualified To Do Business in Florida</b> October 26, 2002	
<b>6. FEI Number</b> 03-0490339		<b>Applied For</b> Not Applicable	
<b>7. CERTIFICATE OF STATUS DESIRED</b> <input checked="" type="checkbox"/>		\$5.00 Additional Fee required for a Certificate of Status	

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


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<b>8. Name and Address of Current Registered Agent</b>			
Name Harold W. Scovill			
Street Address (P.O. Box Number is Not Acceptable) 1605 Main Street			
Suite, Apt. #, Etc. Suite 912			
City Sarasota		State FL	Zip Code 34236

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12/01/03--01035--010 \*\*\$10.00

<b>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.</b>	
Signature of Registered Agent 	Date 12/01/03
REGISTERED AGENT MUST SIGN	

<b>10. Names and Street Addresses of Managing Members/Managers</b>			
Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Robert Buckhannon	4400 S. Tamiami Trail	Sarasota, FL 34231
Mgr	James Buckhannon	4400 S. Tamiami Trail	Sarasota, FL 34231
REINSTATEMENT 2003			
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<b>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 608.408, 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.</b>			
Signature of Managing Member/Manager 	Date 12/1/03	Daytime Phone # 941-921-6100	
Typed or printed name of signing Managing Member/Manager James R. Buckhannon			

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