PLEASE READ

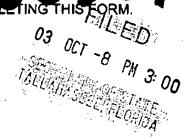
LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L02000032452

1. Limited Liability Company's Name



DYI	NAMIC H	IEALTH OF FL	ORIDA, L	LC .							
				q	(/20/03) 1	20	01023E	∦□1·□ 910	11 <u>2</u>
				Office Address S. Bayshore Drive			4. State/Country of Formation				
Sui			Suite, Apt. # Suite 7	te 703			Florida 5. Date Organized or Qualified To Do Business in Florids 12/4/02				
cny & State Weston, Florida			1 -	City & State Miami, Florida			G. FEI Number Applied For Not Applied For				
_{Др} 33326		Country USA	z _þ 33133		USA		7. CERTIFICAT	E OF STATI	IS DESIRED 🗆 👯	0 And Lonal or a Cort heat	Fee required
			8.	Name and A	ddress of Current Re	gistered	Agent				
	Name World Corporate Services, Inc.										
	Street Address (P.O. Box Number is Not Acceptable)										
Sulta, Apt. #, Etc. 2665 S. Bayshore Drive, Suite 703											
	City Miami							FL	Zip Code 33133		
9. I, being Signature of Registered /	\tilde{A}	egister of agent of the	NEGISTERED AG	_)_	pany, am familler with a	and ecce	pt the obligatio	ns of Ch	apter 608, F.S.		- I
10. Name	s and Street A	ddresses of Managing Me	mberaffillanagers	**							
Titles		Name of lanaging Members/Mans	gers.	Street Address of Each Managing Member/Manager			-	City / State / Zip			
MANAG	CHHABRA, VINCENT			1455 North Park Drive				Weston, Florida 33326			
MANAG	FARUQUI, SABINÄ			1455 North Park Drive				West	on, Florida 333	32 6	
			·		BK					· .	:
	: 	ocia:107	S actualism to the		, 0					·	
			ATEM	EN!	2003					;	
}											
filing thi	is reinstatemen	aging member/menager of t application the reason to hitse (lability company have	r dissolution has b	een eliminati	id, the limited liability or	moany r	ame satisf le	s the requi	apler 608, F.S. I furti ements of section 60 signature shall have	AAM FR .	end that

Daytime Phone #_(305) 858-9900

Typed or printed name of signing Managing Member/Manager

SABINA FARUGE

L02000032452

October 3, 2003

Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Attn: Reinstatement Division

Re: Dynamic Health of Florida, LLC (the "LLC"

Dear Sir or Madam:

As our office advised your department, the LLC never received the Annual Report the 2003 calendar year. Thus, we respectfully request that the LLC be reinstated and that the reinstatement penalty fee be waived.

In accordance with the instructions received, enclosed herewith please find the following in order to reinstate the LLC with the Florida Secretary of State:

- 1. State of Florida Application For Reinstatement; and
- 2. Check no. 2013 payable to the Secretary of State in the amount of \$50.00 to cover the Filing Fee for the 2003 calendar year.

Sabina Farigini

Your assistance in this matter is greatly appreciated.

Sincerely,