



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
 DIVISION OF CORPORATIONS

FILED

03 OCT 27 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L020000034634

Name and Mailing Address

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FLORIDIAN APPRAISAL GROUP, LLC
632 DELANEY AVE #C
ORLANDO FL 32801-3873



US

2. New Mailing Address 3709 Bobolink Lane		4. State/Country of Formation FL	
City, State, Zip Orlando FL 32803		5. Date Organized or Qualified To Do Business in Florida 12/24/2002	
Principal Place of Business 632 DELANEY AVE #C ORLANDO FL 32801 US	3. New Principal Place of Business Address 3709 Bobolink Lane City, State, Zip Orlando FL 32803	6. FEI Number 02-0662820	Applied For Not Applicable
8. Name and Address of Current Registered Agent LEGALZOOM MEVADA INC 111 N.E. FIRST STREET SUITE 901 MIAMI FL 33132		9. Name and Address of New Registered Agent Name ERIC P. EVANS Street Address (P.O. Box Number is Not Acceptable) 3709 Bobolink Lane City Orlando FL Zip Code 32803	
10. 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 [Signature] REGISTERED AGENT MUST SIGN Date 10-20-03			
11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
CEO	ERIC P. EVANS	3709 Bobolink Lane Orla	Orlando FL 32803
		700024616177 11/13/03--01002--010 **150.00	
		REINSTATEMENT	
		03 dec	
12. 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 [Signature] SIGNATURE REQUIRED		Date 10-20-03 Daytime Phone # 407-353-6429	
Typed or printed name of signing Managing Member/Manager			

CR2E034 (7/03)