PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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COMPANY REINSTATEMENT			Secreta	LORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			OF DEC -1 AM 10: 35			
=	MENT # Jability Company's Na	L030000	10643							
	BRAUS	SER REAL	ESTATE, LLO	2		n (
2. Principal Office Address 3. Malling Of				fice Address		CR2E041 (8/05)				
820 SW 12th Avenue			same			4. State/Country of Formation				
Suite, Apt. #,	etc.	-	Suile, Apt. #, ctc.			Florida 5. Date Organized or Qualified 70 Do Business in Florida 3/25/2003				
City & State			City & State						to a total sequences into	
Pompano Beach, FL			- · · · · · · · · · · · · · · · · · · ·		* *	6. FEI Number	0071194		plied For t Applicable	
Zip 3306	9 Country	' SA	Zip	Country		7.	OF STATUS DESIRED	S5.00 Additional	Fee required	
			S. Name and	Address of Current	Penisteres	I Agent				
	Name Gerald A. Brauser Streel Address (P.O. Box Number is Not Acceptable) 820 SW 12th Avenue Suite, Apt. #, Etc. #8R									
	Pompano Beach					FL 33069				
9. I, being a Signature of Rogistered A	Sa	alda	re named limited liability COLUMN GISTERED AGENT MU		wilh and ac	cept the obligation	Date [[]23	.s. 3/0/		
10. Names	and Street Address	s of Managing Mem	here/Menggers							
Titles	es and Street Addresses of Managing Members/Managers Name of Managing Members/ Managers			Street Address of Each Managing Member/Manager			City / State / Zip			
hM	GERALD	A BRA	ruser 8	20 SW1	2 an	_ #8R	Pompa	roBeach	FL 3069	
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filing thi all fees	le reingtatement annlic	ation the reason for ability company have	the receiver or trustice edissolution has been clin been paid. The informal	ninated, the limited IIal lion indicated on this a	bility compar application is	ny name satistles true and accurat /	the requirements of s te, and my signature s	section 608.406, F.S. hail have the same i	., and that	
Signature of Managing M	lember/Manager	Dent	defin				aytime Phone#	14.788.	9554	
Typed or prin	nted name of signing I	Managing Member/	Manager	RALD A.	<u> KRA</u>	MIEK	, MM			