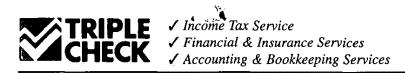
## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT	Secreta	A DEPARTMENT OF STATE Secretary of State VISION OF CORPORATIONS		FILED  2004-OCT 21 PM 12: 28  DIVISION OF CORPORATIONS		
DOCUMENT # L03000024976  1. Limited Liability Company's Name TEAM SPORTS SHOP, LLC				TALLAHASSEE, FLORIDA		
					3.	
2. Principal Office Address       3. Mailing C         2771-30 MONUMENT RD       2771-3         Suite, Apt. #, etc.       Suite, Apt. #,		0 MONUMENT RD 4		4. State/Country of Formation FLORIDA		
e na ann an				Date Organized or Qualified To Do Business in Florida 07/01/03		
City & State JACKSONVILLE, FL	JACKSONVIL	SONVILLE, FL		Applied For Not Applied by Not Applied Not Applied by Not Applicable		
32225 Country USA	<sup>Zip</sup> 32225	Country USA	7. CERTIFICATE	OF STATUS DESIRED  \$5.00 / for a	Additional Fee required Certificate of Status	
	8. Name and	Address of Current Regis	tered Agent			
BRIAN BUTCH Street Address (P.O. Box Number is Suite, Apt. #, Etc.  City JACKSONVILLE	Not Acceptable) 2771-	30 MONUMENT	RD 10/21	000420683 /0401048001 State Zip Code FL 32225	369 **50 00	
	TEGISTERED AGENT MUS		nd accept the obligation	ons of Chapter 608, F.S.  Date		
Titles Name of Street Addresses of Managing Members/Managers  Street Address of E						
Managing Members/Mana		Managing Member/Manager  2771-30 MONUMENT RD		JACKSONVILLE, FL 32225		
11. Leertify that I am managing member/manager filing this reinstatement application the reason all fees owed by the limited liability company has if made under oath.  Signature of Managing Member/Manager  Typed or printed name of signing Managing Memb	for dissolution has been elim ave been paid. The informati	inated, the limited liability or on indicated on this applica	ompany name satisfies ion is true and accura	s the requirements of section 608	8.406, F.S., and that the same legal effect	



ي كى كى 320 Osceola Avenue Jacksonville Beach, FL 32250 Phone 904/241-2533 Fax: 904/241-1604

FILE www.triplechecktax.com

2004 OCT 21 PM 12: 28

DIVIDION OF CORPORATIONS TALLAHASSEE, FLORIDA

October 20, 2004

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RE: Limited Liability Company Reinstatement

Document #L03000024976; Team Sports Shop, LLC

Dear Sir/Madam,

Please see the enclosed Reinstatement form for our client listed above. We are requesting that you accept this application and payment of \$50.00, for the year 2004.

Mr. Butch, Owner of the above Corporation, did not receive his report for the referenced period. Upon our annual review of his account along with your web site, it was determined that he had not filed the Annual Report for the current year. He has always filed his government paperwork timely and is very conscientious regarding payment for all yearly fees and taxes.

Thank you for your help and consideration with this matter. Please contact me if you have any questions/concerns regarding this matter.

Sincerely,

Heather Copeland

**Enclosures: Corporate Reinstatement** 

Check: #9937